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SCOTT T. MURAKAMI  
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**STATE OF HAWAII  
DEPARTMENT OF LABOR AND INDUSTRIAL RELATIONS**

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March 21, 2019

**LATE**

To: The Honorable Karl Rhoads, Chair,  
The Honorable Glenn Wakai, Vice Chair, and  
Members of the Senate Committee on Judiciary

The Honorable Donovan M. Dela Cruz, Chair,  
The Honorable Gilbert S.C. Keith-Agaran, Vice Chair, and  
Members of the Senate Committee on Ways and Means

Date: Wednesday, April 3, 2019  
Time: 10:00 a.m.  
Place: Conference Room 221, State Capitol

From: Scott T. Murakami, Director  
Department of Labor and Industrial Relations (DLIR)

**Re: H.B. 673 H.D.2, S.D.1 RELATING TO MEDICAL CANNABIS**

The DLIR appreciates the intent of this measure to provide limited employment protections for those that are qualifying medical cannabis patients pursuant to Hawaii law. However, the DLIR notes that the jurisprudence covering this issue is evolving and would prefer to administratively adjudicate such protections after the laws and case law in other jurisdictions develops further.

The measure, as drafted, contains ambiguous language that would create difficult burdens upon the population it is intended to protect. The Department notes the following:

- Page 5, lines 8-9—it is unclear what the basis of what the exception is and further “heights” and “confined spaces” is not defined.
- Page 5, lines 10-16, the language suggests that employees can work while impaired unless the employee “operates or is in physical control” of chemicals that require government issued permits or high voltage electrical lines.
- Page 5, lines 17 through 19, an employee may be deemed to be impaired

regardless of whether the employee used cannabis.

- Definition of “impaired” is vague and could subjectively apply to any employee at any time.



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

**LATE**

**Testimony COMMENTING on H.B. 0673 H.D.2 S.D.1  
RELATING TO MEDICAL CANNABIS.**

SENATOR KARL RHOADS, CHAIR  
SENATE COMMITTEE ON JUDICIARY

SENATOR DONOVAN M. DELA CRUZ, CHAIR  
SENATE COMMITTEE ON WAYS AND MEANS

Hearing Date: Wednesday, April 03, 2019

Room Number: 211

1 **Fiscal Implications:** None identified.

2 **Department Testimony:** The Department is in STRONG SUPPORT of section 2 of this  
3 measure which amends section 329D, HRS, to allow for the transfer of ownership of a  
4 dispensary license in specified circumstances. This amendment is essential to the continued  
5 functioning of the existing licensed medical cannabis dispensaries. As written, Chapter 329D,  
6 HRS, does not allow for the sale or transfer of a dispensary license under any circumstance. In  
7 the event of the death, legal incapacity, permanent disability, voluntary resignation, or  
8 termination of the individual licensee, the department would have no recourse other than to  
9 revoke the dispensary's license. Doing so would be highly detrimental to patients as well as the  
10 dispensaries. The Department urges the legislature to move section 2 of this measure forward.

11 The Department appreciates the intent of section 3 of this measure to provide limited  
12 employment protections to qualifying medical cannabis patients by preventing employers from  
13 discriminating against an employee based on their status as a qualifying patient and prohibiting  
14 employers from acting against an employee based solely on an employee's status as a qualifying

- 1 patient or if the results of an employee's drug test are positive for cannabis. However, since
- 2 enforcement of these laws is the jurisdiction of the Department of Labor and Industrial Relations,
- 3 the Department DEFERS to the DLIR on this subject matter.
- 4 Thank you for the opportunity to testify on this measure.



# HAWAI‘I CIVIL RIGHTS COMMISSION

830 PUNCHBOWL STREET, ROOM 411 HONOLULU, HI 96813 · PHONE: 586-8636 · FAX: 586-8655 · TDD: 568-8692

April 3, 2019  
Rm. 211, 10:00 a.m.

To: Hon. Karl Rhoads, Chair  
Members of the Senate Committee on Judiciary

Hon. Donovan M. Dela Cruz, Chair  
Members of the Senate Committee on Ways and Means

**LATE**

From: Linda Hamilton Krieger, Chair  
and Commissioners of the Hawai‘i Civil Rights Commission

Re: H.B. No. 673, H.D. 2, S.D. 1

The Hawai‘i Civil Rights Commission (HCRC) has enforcement jurisdiction over Hawai‘i’s laws prohibiting discrimination in employment, housing, public accommodations, and access to state and state funded services (on the basis of disability). The HCRC carries out the Hawai‘i constitutional mandate that no person shall be discriminated against in the exercise of their civil rights. Art. I, Sec. 5.

H.B. No. 673, H.D. 2, S.D. 1, prohibits: 1) discrimination based on status as registered qualifying medical cannabis patient; and, 2) adverse employment action based solely on such status or on a positive drug test for cannabis or its components. This employment protection is critical for registered qualifying medical cannabis patients, because there is no correlation between a positive test and current impairment. The measure also provides a process for the transfer of a dispensary license.

**The HCRC supports the intent of H.B. No. 673, H.D. 2, S.D. 1, and offers these comments:**

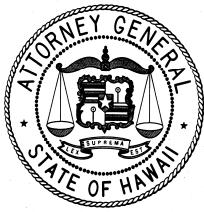
The new statutory protection is placed in a new section in part III of HRS chapter 378, not under the jurisdiction of the HCRC, which is limited to chapter 378, part I. The HCRC appreciates that this placement is consistent with statutory recognition that the HCRC does not enforce the rights of registered

medical cannabis users generally. The HCRC's interest is focused on the rights of persons with a disability. The H.R.S. § 329-122 definition of "debilitating medical condition" is not identical to the H.R.S. § 378-1 and H.A.R. § 12-46-182 definition of "disability," so not every registered qualifying medical cannabis patient will necessarily be a person with a disability entitled to a reasonable accommodation.

On pages 4-5 of the bill, the new § 378-\_\_(b)(2)(B) provides that the new statutory protection shall not prohibit an employer from disciplining an employee who is a qualifying patient for failing a drug test, if the employee performs work at heights or in confined spaces. In contrast, the new § 378-\_\_(b)(2)(C) provides that the new statutory protection shall not prohibit an employer from disciplining an employee who is a qualifying patient for failing a drug test, if such employee works with dangerous chemicals or high voltage electricity lines **while impaired**. It is not clear why these exceptions are different, the first allowing discipline for a failed drug test (without regard to impairment), and the second for a failed drug test, but only for working "while impaired" with chemicals or high voltage electricity lines.

On page 6 of the bill, the new § 378-\_\_(c)(2) seems to provide protection against tort claims for injuries suffered by third parties, if the employer had no knowledge or reason to know that an employee was impaired. It seems like an overly broad shield against liability for injuries suffered by innocent third parties. For example, if a window washer who may have been impaired drops a bucket or cleaning tool from on high, and a passerby on the sidewalk below is injured or killed, should the window washing company be shielded from liability if they did not have knowledge that an employee was impaired?

The HCRC supports the intent of the protections offered by H.B. No. 673, H.D. 2, S.D. 1, with these comments.



**TESTIMONY OF  
THE DEPARTMENT OF THE ATTORNEY GENERAL  
THIRTIETH LEGISLATURE, 2019**

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**ON THE FOLLOWING MEASURE:**

H.B. NO. 673, H.D. 2, S.D. 1, RELATING TO MEDICAL CANNABIS.

**LATE**

**BEFORE THE:**

SENATE COMMITTEES ON JUDICIARY

AND ON WAYS AND MEANS

**DATE:** Wednesday, April 3, 2019

**TIME:** 10:00 a.m.

**LOCATION:** State Capitol, Room 211

**TESTIFIER(S):** Clare E. Connors, Attorney General, or  
Tara K.C.S. Molnar, Deputy Attorney General

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Chairs Rhoads and Dela Cruz and Members of the Committees:

The Department of the Attorney General provides the following comments.

This measure provides a process for the voluntary or involuntary sale or transfer of a medical cannabis dispensary license (page 2, line 18, through page 3, line 21). However, the main purpose of this bill is to prohibit an employer from discriminating against an employee based on the employee's status as a qualifying patient who uses medical cannabis. This bill prohibits taking action against an employee based solely on the employee's qualifying patient status, or if the employee's drug test results are positive for cannabis (page 4, lines 4-18). It also specifies what actions are permissible and impermissible for employers and employees (page 4, line 19, through page 7, line 11). The bill accomplishes these purposes by adding a new section to chapter 378, Hawaii Revised Statutes (HRS).

Some concerns and notes are:

- (1) on page 5, lines 10-16, the wording in subsection (b)(2)(C) suggests that the employer may discipline an employee who is a qualifying patient for failing a drug test, if the employee is impaired and operates or is in physical control of regulated chemicals or high voltage electricity lines. However, the provisions in subsection (b)(2) seem to allow an employer to discipline an employee regardless of whether

they are impaired. Therefore, subsection (b)(2)(C), which requires impairment does not seem to be consistent. Thus, we have two possible fixes:

- (a) deletion of subparagraph (b)(2)(C), and clauses (i) and (ii) would resolve this concern, because pursuant to paragraph (3), page 5, line 17, through page 6, line 2, all employees may be disciplined for being impaired;
  - (b) alternatively, deletion of the words "while impaired" from page 5, line 11, would resolve this concern and would prohibit employees who work with regulated chemicals or high voltage electricity lines from the medical use of cannabis;
- (2) adding the following wording on page 5, line 17, as subparagraph (b)(2)(D), "the employee performs employment duties in a high risk or hazardous job that is likely to subject or expose the registered qualifying patient or others to danger if the registered qualifying patient is working while impaired," would resolve the concern that it appears that there are other high risk jobs for which safety is a concern, in addition to the exceptions listed;
- (3) deleting the words "while working on the employer's premises," on page 6, lines 7-8, would resolve the concern that the wording appears to allow employees to work while impaired if the employees are working off of the employer's premises;
- (4) on page 4, line 19, through page 5, line 2, it is unclear what it means to enforce a workforce drug policy in a nondiscriminatory manner;
- (5) adding the words, "at work" after the word "impaired," on page 5, line 19, would resolve the concern that it appears an employee can be disciplined for being impaired outside of work;
- (6) adding the wording "but not solely due to," before the word "negligence," on page 7, line 4, would resolve the concern that an employee may be deemed to be impaired merely because they were negligent or careless.

Thank you for the opportunity to provide testimony.



**HB-673-SD-1**

Submitted on: 4/2/2019 8:29:46 AM

Testimony for JDC on 4/3/2019 10:00:00 AM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Victor K. Ramos	Testifying for Maui Police Department	Oppose	No

Comments:

**KAUAI COMMUNITY HEALTH ALLIANCE**  
**HALE LEA MEDICINE**

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2460 Oka Street  
Kilauea, Kauai, HI 96754  
808.828.2885 phone  
808.828.0119 fax  
www.kauai-medical.org  
[winkler@kauai-medical.org](mailto:winkler@kauai-medical.org) (email)

April 1, 2019

Re: opposition to HB 673 HD2 SD1 in its current form

Honorable Chairs, Vice Chairs and Committee members:

Hale Lea Medicine has been the primary access for medical care on Kauai's North Shore for over 25 years. We operate as a 501(c)3 nonprofit, and service approximately 15,000 visits yearly.

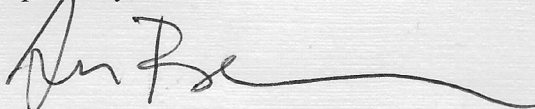
We oppose HB 673 HD2 SD1 in its current form. Language including PAs (of which we employ several) was removed, despite the fact that it was the original intent of the bill.

We also employ several APRNs who have near identical training, are on par nationally with PAs, and perform the same job descriptions at our medical facility. There is no justifiable reason for PAs to be removed from this bill.

Like APRNs, PAs are recognized medical providers by Medicare, Medicaid, HMSA, Kaiser, UHA, HMAA, and virtually every private health insurer in the nation.

We have generally been silent on this legislation but find this particular revision hard to fathom. Please allow the bill to move forward without amendments.

Respectfully,



Art Brownstein, MD  
Acting Medical Director  
KAUAI COMMUNITY HEALTH ALLIANCE  
HALE LEA MEDICINE



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

TO: Senate Committees on Judiciary and Ways & Means  
FROM: Carl Bergquist, Executive Director  
HEARING DATE: April 3, 2019, 10AM  
RE: HB673 HD2 SD1 Proposed, Relating to Medical Cannabis, **COMMENTS**

Dear Chairs Rhoads & Dela Cruz, Vice Chairs Wakai & Keith-Agaran, Committee Members:

The Drug Policy Forum of Hawai'i (DPFH) **supports** this SD1 version, particularly the employment protections for medical cannabis patients, and offers the following **comments**. In general, we support the types of reforms in the original bill and the HD1/HD2 versions, which will facilitate the operation of the medical cannabis dispensary system to ensure that the needs of Hawaii's nearly 25,000 medical cannabis patients are met. Recently, out-of-state visitors, who are also registered patients in their home states, also became authorized to enter the dispensaries and buy medical cannabis during their business or holiday visit to the islands. Accordingly, **we request their reinsertion and also respectfully ask for the inclusion of the content of [HB37 Proposed HD1](#) (regarding medical cannabis and opioids) heard by its subject matter committee in the House.** The rationale for doing so is discussed below.

First, DPFH wishes underscore the importance of the proposed **employment protections for medical cannabis patients**, which have been discussed in two working groups and the subject of numerous bills in past legislative sessions.

Most recently, **an Arizona federal court, situated in the 9<sup>th</sup> Circuit like Hawai'i, ruled that Wal-Mart violated the state medical cannabis law when it terminated an employee who was not impaired on the job.**<sup>1</sup> This and other court rulings highlight

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<sup>1</sup> <https://www.lexology.com/library/detail.aspx?g=ed8fda2b-7ee7-4b97-ae2d-4828421ca2d8>.

the need for *affirmative* employment protections under state law for medical cannabis patients. **Such protections have been found *not* to violate federal law by at least two federal courts.**<sup>2</sup> Moreover, the joint LCA/CPH committee conference report ([SSCR336](#)) for [SB1524 SD1](#) (which provided the language for the employment provisions in the SD1 version of this bill) found that:

*that thirty-one states allow for the medical use of cannabis by qualifying patients, with a growing number of states establishing employment protections for qualifying medical cannabis patients. . . there are no corresponding employment protections for qualifying patients. **A qualifying patient can be discriminated against in the hiring process, merely because of the patient's status as a qualifying patient, or fired at an employer's discretion for failing a drug test, even if the qualifying patient is not exhibiting any symptoms of being impaired.** This measure therefore prohibits employers from discriminating against an employee based on the employee's status as a qualifying patient. This will allow qualifying patients to use their medication without fear of being disciplined.*

**CONCLUSION: We agree with the committee report and strongly support the long overdue extension of these protections for medical cannabis patients.**

## **SUGGESTED AMENDMENTS**

1) **The edibles provisions** of the underlying bill are particularly important. Edibles have been discussed in two separate working groups formed pursuant to Act 230 of 2016 & Act 116 of 2018. They are available in numerous other states including in Oklahoma, which got its entire program up and running in a matter of months. In fact, only 5 other of the 33 states that have legalized medical cannabis prohibit edibles as Hawai'i does. With Maryland poised to end its ban, that list will narrow to four. Most with a strong anti-smoking stance like Hawaii's allow them.

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<sup>2</sup> *Noffsinger v. SSC Niantic*, 338 F.Supp.3d 78 ( D. Conn. 2018), see <https://my.vanderbilt.edu/marijuanalaw/2018/09/update-connecticut-employment-discrimination-case-noffsinger-v-ssc-niantic/> for why the Drug Free Workplace Act in particular is not in tension with these kinds of protections; *Whitmire v. Wal-Mart*; CV-17-08108-PCT-JAT; (D. Ariz. 2019), see <https://www.quarles.com/publications/new-az-court-ruling-employee-can-sue-for-discrimination-as-a-marijuana-card-holder/>.

(a) Edibles are often **the only form of medicine that can help patients who do not want, or cannot, inhale.** In addition, as many of our local resident patients are renters, they often cannot smoke their medicine. Under current law, they have to prepare edibles themselves, putting them at risk of getting the dosage wrong. They may also turn to the black market, which carries numerous risks of its own. Moreover, soon our **out of state patients**, who mostly stay in hotels that prohibit smoking, will visit dispensaries. Imagine their surprise when they have gone through the process to register with our Department of Health, only to find out that there is no form of medicine that they can consume in public or in their hotel accommodation.

(b) Secondly, I wish to point out that any suggested connection between the availability of tested, regulated **edibles and impaired driving** is not based on any evidence. As the local study that is cited by the Hawai'i Department of Transportation (HIDOT) itself states, "the data is insufficient to demonstrate causality between cannabis use and crashes, nor does it prove that cannabis is an independent risk factor for injury or death. . ."<sup>3</sup>. Research by RTI International actually studied edibles specifically, and found the following:

The study, published in Drug and Alcohol Dependence, found that in the context of legalization, many marijuana users will try new marijuana products and use edibles, and that doing so markedly increases the odds of experiencing an unexpected high. *The research shows that most people who experienced an unexpected high slept it off, and others engaged in protective behaviors such as deciding not to drive or changing or cancelling plans.*<sup>4</sup>

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<sup>3</sup> Susan Steinemann, Daniel Galanis, Tiffany Nguyen and Walter Biffel, "Motor vehicle crash fatalities and undercompensated care associated with legalization of marijuana," Journal of Trauma and Acute Care Surgery 85, Number 3 (Honolulu, HI, May 2018): 566-571.

<sup>4</sup> <https://www.rti.org/news/study-trying-new-marijuana-products-and-edibles-associated-unexpected-highs>.

(c) Alaska's Department of Health & Human Services, Division of Public Health has a great public education page about edibles that speaks to science rather than stigma.<sup>5</sup> Please see Appendix 1 for useful graphics to consider.

(d) Similarly, a recently released study on the effects of a public education campaign targeting targeting Colorado teens found it to have been very effective and that teen use in Colorado remains below the national average five years after the onset of adult use legalization and with a wide availability of edibles.<sup>6</sup> Please see Appendix 2 for some results from this study and graphics from the campaign.

**CONCLUSION: These kinds of campaigns can address real concerns and still allow for the sale of medical cannabis edibles to long-suffering patients, both local and visitors.**

#### *ADDITIONAL REFORMS*

2) **Medical cannabis**, among other uses, can in certain circumstances serve as an alternative or complement to **opioids/prescription painkillers**. As Hawai'i stakeholders work together to proactively address the opioid epidemic here before, we are missing an opportunity by not as much as mentioning the role that medical cannabis could play. *The stigma is palpable.* In the summer of 2018, Governor Ige vetoed a bill that could begin to address this discrepancy. That bill was reintroduced this year as HB37, and ahead of its hearing a proposed HD1 version was released by the House Committee on Health. Commenting on the proposed version, the Department of Health expressed its preference for the Proposed HD1 and wrote:

[T]he department recognizes and respects the legislature's authority to act as an alternative route to the department's standardized review process. . . . There is evidence that chronic debilitating pain related conditions have made positive results by the use of medical cannabis for many individuals who have access to it as an alternative to long-term use of opioid pain

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<sup>5</sup> <http://dhss.alaska.gov/dph/Director/Pages/marijuana/edibles.aspx>.

<sup>6</sup> <https://www.thehighcosts.com/>.

medications . . . There is also substantial evidence that medical cannabis when used for pain that was either caused or exacerbated by opioid and other substance use disorders has decreased prevalence of opioid use and overdose.<sup>7</sup>

**CONCLUSION: We agree with DOH, and request that HB37 HD1 Proposed be inserted into this bill.**

Mahalo for the opportunity to testify.

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<sup>7</sup> [https://www.capitol.hawaii.gov/Session2019/Testimony/HB37\\_TESTIMONY\\_HLT\\_02-05-19\\_.PDF](https://www.capitol.hawaii.gov/Session2019/Testimony/HB37_TESTIMONY_HLT_02-05-19_.PDF).

## APPENDIX 1: Alaska's Public Education Campaign & Edibles



**Be Careful When You Eat and Drink Marijuana.**

**THESE AREN'T YOUR GRANDMA'S BROWNIES.**

Learn more about marijuana edibles.



### Be Careful When Eating and Drinking Marijuana

**Start low...** Start with a single serving of 5 mg of THC or even less. THC is the chemical in marijuana that makes a person high.

**And go slow.** You may feel fine for several hours after consuming a marijuana edible, and then suddenly feel very high. Don't eat or drink more of a marijuana product until you have waited at least 2-4 hours.

**First-time using? Be cautious.** Eating too much of a marijuana edible too soon may lead to unwanted effects.



**Driving while high is a DUI.**

If you've consumed marijuana edibles, do not get behind the wheel.



**Don't give marijuana to children or anyone under 21 years old.**

**Steer clear if you are pregnant or breastfeeding.**

Using marijuana while pregnant or breastfeeding may harm your baby.

**Store your marijuana and edibles safely.**

Lock it up, out of reach from children and pets.



If you consumed too much, call for help. Call the Poison Control Hotline at 1-800-222-1222 for free, fast, expert help anytime.

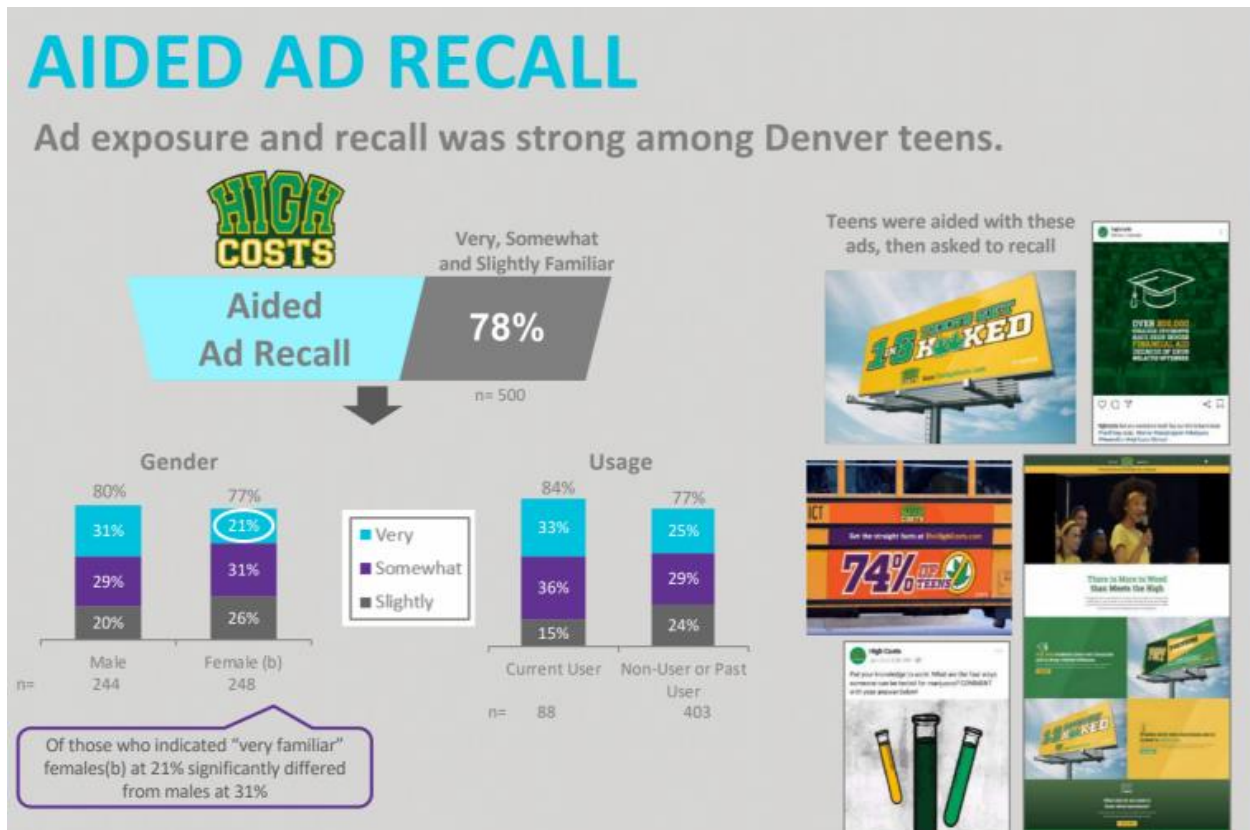
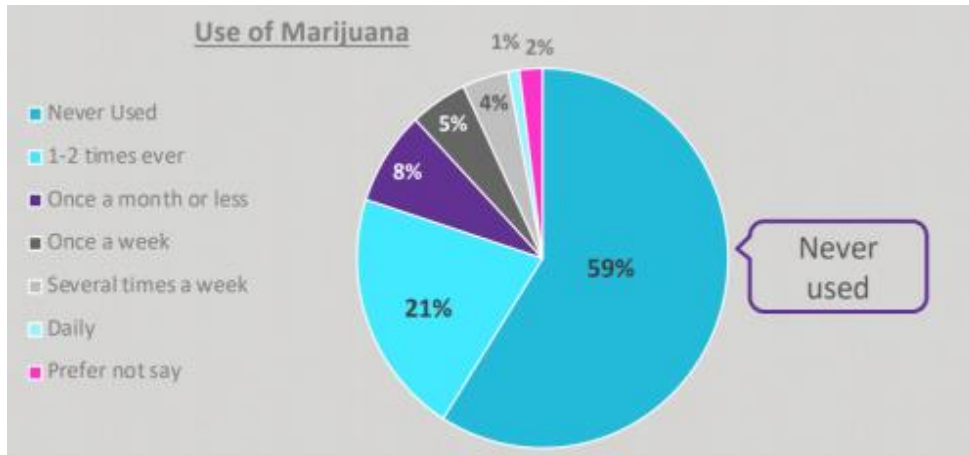
For more information visit [marijuana.dhss.alaska.gov](http://marijuana.dhss.alaska.gov)



SOURCE: <http://dhss.alaska.gov/dph/Director/Pages/marijuana/edibles.aspx>.



## APPENDIX 2: Denver's "High Costs" Campaign Targeted at Teens



**HIGH  
COSTS**

THE FACTS ABOUT

# Hit me with the facts.

We want to be straight with you.  
Here's what we know about marijuana.



# 79%

of Denver high school  
students *do not* use  
marijuana regularly.

**SOURCES:** <https://www.thehighcosts.com/wp-content/uploads/2019/03/High-Costs-Post-Campaign-Survey-Results.pdf>; <https://www.thehighcosts.com/>.



**Akamai Cannabis Clinic**

3615 Harding Ave, Suite 304  
Honolulu, HI 96816

TESTIMONY ON HOUSE BILL 673 HD2 SD1  
RELATING TO MEDICAL CANNABIS

By  
Clifton Otto, MD

Senate Committee on Judiciary  
Senator Karl Rhoads, Chair  
Senator Glenn Wakai, Vice Chair

Senate Committee on Ways and Means  
Senator Donovan M. Dela Cruz, Chair  
Senator Gilbert S.C. Keith-Agaran, Vice Chair

Wednesday, April 3, 2019; 10:00 AM  
State Capitol, Conference Room 211

Thank you for the opportunity to provide testimony on this measure. Please consider the following comments related to this bill. There are still several critical issues that have yet to be addressed by the Legislature this session:

**Comment #1** – A controlled substance with medical use cannot have the “highest degree of danger”. Subjecting Medical Use Cannabis to regulation as a state Schedule I undermines the validity of our Medical Use of Cannabis Program, and makes it more difficult for our local law enforcement to distinguish medical from non-medical use.

The way to resolve this situation is to re-harmonize the medical use of cannabis in Hawaii with the scheduling criteria for state Schedule I. The following amendment would provide this remedy:

Section 329-14, Hawaii Revised Statutes, is amended by adding the following subsection:

(f) The enumeration of cannabis, tetrahydrocannabinols or chemical derivatives of these as Schedule I controlled substances does not apply to the medical use of cannabis pursuant to Section 329, Part IX, and Section 329D, Hawaii Revised Statutes.

“An Accepted Medical Use Supporter”

Hawaii would not be the first to re-harmonize medical use with controlled substance regulation. Guam has already done the same:

[Exempt from Guam Schedule I:](#)

Section 2. The following *new* subsection (g) is added to Appendix A of Chapter 67 of Title 9 Guam Code Annotated, to read as follows:

“(g) The enumeration of marihuana, tetrahydrocannabinols or chemical derivatives of these as Schedule I controlled substances **does not apply** to the medical use of cannabis pursuant to the Joaquin Concepcion Compassionate Cannabis Use Act of 2013.”

Please note, we are not talking about rescheduling cannabis. We are talking about recognizing that the medical use of cannabis cannot be regulated as a state Schedule I controlled substance.

We even have a precedent for the exemption of specific use of a Schedule I controlled substance at the federal level, so this not something unusual:

[Exempt from federal Schedule I:](#)

21 CFR 1307.31 - Native American Church.

“The listing of peyote as a controlled substance in Schedule I **does not apply** to the nondrug use of peyote in bona fide religious ceremonies of the Native American Church, and members of the Native American Church so using peyote are exempt from registration.”

**Comment #2** – The inter-island transportation of cannabis for personal medical use continues to be an issue that is requiring significant amounts of local law enforcement time due to the processing of patients who have been referred by TSA, which is distracting our officers from other duties and threatening the safety of our airports.

Local law enforcement officers are also telling patients that they cannot travel with their medicine because it is against federal law, which is beyond the authority of a state law enforcement agency, and not entirely true because of the [federal aviation regulation](#) that specifically exempts the carriage of cannabis aboard aircraft if authorized by state law or state agency.

Therefore, in order to clarify the existing provisions for inter-island transport within Hawaii’s Medical Use of Cannabis Act and to protect the right of patients to transport legal amounts of cannabis for personal medical use to other islands under state law, the following amendment needs to be made to the Medical Use of Cannabis section of Hawaii’s Uniform Controlled Substances Act:

“An Accepted Medical Use Supporter”

Testimony on HB673 HD2 SD1  
Senate Committees on Judiciary and Ways and Means  
April 3, 2019  
Page 3

[HRS 329-122\(f\):](#)

“For purposes of interisland transportation, “transport” of cannabis, usable cannabis, or any manufactured cannabis product, by any means is allowable only by a qualifying patient or qualifying out-of-state patient for their personal medical use, or between a production center or retail dispensing location and a certified laboratory for the sole purpose of laboratory testing pursuant to section 329D-8, as permitted under section 329D-6(m) and subject to section 329D-6(j), and with the understanding that state law and its protections do not apply outside of the jurisdictional limits of the State. The Department of Transportation and the Department of Public Safety shall adopt rules to provide compliance with this section.

Please do not allow this bill to pass out of your committees until these issues have been fully addressed.

To: Chair Karl Rhoads  
Vice Chair Glenn Wakai  
Members of the Senate Committee on Judiciary

Chair Donovan M. Dela Cruz  
Vice Chair Gilbert S.C. Keith-Agaran  
Members of the Senate Committee on Ways and Means

From: Dr. Rachel Klein  
President  
Hawaii Society of Naturopathic Physicians

Re: HB637, Relating to Medical Cannabis  
April 3, 2019 at 10:00 am, Conference Room 211

Position: Support with comments- REQUEST FOR AMENDMENT

My name is Rachel Klein and I am a licensed naturopathic physician practicing in Hilo, Hawaii for the past five years. I'm writing to you as the president of the Hawaii Society of Naturopathic Physicians (HSNP). Thank you very much for hearing HB673. Based on recent actions as outlined below, the HNSP respectfully requests that the naturopathic physicians be added back into the bill, to allow naturopathic physicians to provide written certification for qualifying patients to improve patient access to medical cannabis.

HB673 as introduced included naturopathic physicians in the language. However, naturopathic physicians were removed from the bill in the House Health Committee after objections were raised by the Department of Health and the Department of Public Safety. In their written testimony, the Department of Public Safety stated:

*...if HB 673 were to pass as is, naturopathic physicians would not be able to register with PSD NED because they do not have the authority to work with any controlled substances. Under chapter 455-6, HRS, the Hawaii Board of Naturopathic Medicine restricts the, "prescribing, administering, and dispensing of any naturopathic formulary (ie drugs, vitamins and medications) that are not included in the formulary..." As of February 3, 2019, the naturopathic physician's formulary as published on the Board's website specifically states, "Controlled Substances are excluded from this formulary (emphasis added)." Only after the Board of Naturopathic Medicine has added medical cannabis certifications to their authorized formulary would naturopathic physicians be able to issue medical cannabis certifications in Hawaii.*

Over the past two months, the HNSP has been working with the Hawaii Board of Naturopathic Medicine (Board) on this issue. At their meeting on February 15, 2019, the Board addressed medical cannabis. The draft meeting minutes state, "The Board concurred that it is within the scope of practice that medical cannabis can be prescribed by naturopathic physicians." Further,

the minutes state that the Board chairperson affirmed his interpretation that medical cannabis falls within the classification of an herbal medicine, which is already on the formulary.

On March 20, 2019, the Board of Naturopathic Medicine approved eliminated the exclusion of controlled substances. We believe that these actions address the concerns of the Departments of Health and Public Safety. The publishing of this update is in process. If you have any questions about the actions taken by the board, you can contact Christopher Fernandez, Executive Officer at the DCCA Professional & Vocational Licensing Division, phone 808-586-2708.

Certification of patients for medical cannabis is well within the training and skills of naturopathic physicians and if granted the ability to perform them, our profession could help improve access to this important healthcare option for patients in need.

The amendments that we request are cited directed from the bill as originally introduced.

*Section 329-121, Hawaii Revised Statutes, is amended as follows:*

*By amending the definition of “written certification to read:*

*““Written certification” means the qualifying patient’s medical records or a statement signed by a qualifying patient’s physician, naturopathic physician, or advanced practice registered nurse, stating that in the physician’s, naturopathic physician’s, or advanced practice registered nurse’s professional opinion, the qualifying patient has a debilitating medical condition and the potential benefits of the medical use of cannabis would likely outweigh the health risks for the qualifying patient. The department of health may require, through its rulemaking authority, that all written certifications comply with a designated form. “Written certifications” are valid for one year from the time of signing; provided that the department of health may allow for the validity of any written certification for up to three years if the qualifying patient’s physician, naturopathic physician, or advanced practice registered nurse states that the patient’s debilitating medical condition is chronic in nature.”*

*By adding a new definition to be appropriately inserted and to read:*

*““Naturopathic physician” means a person who holds a current license issued under chapter 455 to practice naturopathic medicine, is licensed with authority to prescribe drugs, and is registered under section 329-32.”*

*Section 329-122, Hawaii Revised Statutes, is amended as follows:*

*By amending subsection (a) to read: “(a) Notwithstanding any law to the contrary, the medical use of cannabis by a qualifying patient shall be permitted only if:*

- (1) The qualifying patient has been diagnosed by a physician, naturopathic physician, or advanced practice registered nurse as having a debilitating medical condition;*
- (2) The qualifying patient’s physician, naturopathic physician, or advanced practice registered nurse has certified in writing that, in the physician’s, naturopathic physician’s, or advanced practice registered nurse’s professional opinion, the potential benefits of the medical use of cannabis would likely outweigh the health risks for the particular qualifying patient; and”*

Section 329-123, Hawaii Revised Statutes, is amended by amending subsections (a) and (b) to read as follows:

“(a) Physicians, naturopathic physicians, or advanced practice registered nurses who issue written certification shall provide, in each written certification, the name, address, patient identification number, and other identifying information of the qualifying patient. The department of health shall require, in rules adopted pursuant to chapter 91, that all written certifications comply with a designated form completed by or on behalf of a qualifying patient. The form shall require information from [he]:

(1) The applicant [T];

(2) The primary caregiver[]; and

(3) The physician, naturopathic physician, or advanced practice registered nurse, as specifically required or permitted by this chapter. The form shall require the address of the location where the cannabis is grown and shall appear on the registry card issued by the department of health. The certifying physician, naturopathic physician, or advanced practice registered nurse shall be required to have a bona fide physician-patient relationship, bona fide naturopathic physician-patient relationship, or bona fide advanced practice registered nurse-patient relationship, as applicable, with the qualifying patient. All current active medical cannabis permits shall be honored through their expiration date.

*(b) Qualifying patients shall register with the department of health. The registration shall be effective until the expiration of the certificate issued by the department of health and signed by the physician, naturopathic physician, or advanced practice registered nurse. Every qualifying patient shall provide sufficient identifying information to establish the personal identities of the qualifying patient and the primary caregiver. Qualifying patients shall report changes in information within ten working days. Every qualifying patient shall have only one primary caregiver at any given time. The department of health shall issue to the qualifying patient a registration certificate, and shall charge \$35 per year.*

SECTION 6. Section 329-126, Hawaii Revised Statutes, is amended by amending its title and subsection (a) to read as follows:

*h1329126 Protections afforded to a treating physician, naturopathic physician, or advanced practice registered nurse.*

*(a) No physician, naturopathic physician, or advanced practice registered nurse shall be subject to arrest or prosecution, penalized in any manner, or denied any right or privilege for providing written certification for the medical use of cannabis for a qualifying patient; provided that:*

*(1) The physician, naturopathic physician, or advanced practice registered nurse has diagnosed the patient as having a debilitating medical condition, as defined in section 329-121;*

*(2) The physician, naturopathic physician, or advanced practice registered nurse has explained the potential risks and benefits of the medical use of cannabis, as required under section 329-122;*

*(3) The written certification is based upon the physician’s, naturopathic physician’s, or advanced practice registered nurse’s professional opinion after having completed a full assessment of the patient’s medical history and current medical condition made in the course of a bona fide*



*physician-patient relationship, bona fide naturopathic physician-patient relationship, or bona fide advanced practice registered nurse-patient relationship, as applicable; and  
(4) The physician, naturopathic physician, or advanced practice registered nurse has complied with the registration requirements of section 329-123.'*

*Section 329-128, Hawaii Revised Statutes, is amended by amending subsection (b) to read as follows:*

*“(b) Notwithstanding any law to the contrary, fraudulent misrepresentation to a law enforcement official of any fact or circumstance relating to the issuance of a written certificate by a physician, naturopathic physician, or advanced practice registered nurse not covered under section 329-126 for the medical use of cannabis shall be a misdemeanor. This penalty shall be in addition to any other penalties that may apply for the non-medical use of cannabis.”*

Thank you for taking the time to hear this important issue.



## HAWAII EDUCATIONAL ASSOCIATION FOR LICENSED THERAPEUTIC HEALTHCARE

To: Senator Karl Rhoads, Chair Judiciary Committee  
Senator Donovan Dela Cruz, Vice-Chair Ways and Means  
Senator Glenn Wakai, Vice-Chair Judiciary Committee  
Senator Gilbert Keith-Agaran, Vice-Chair Ways and Means  
Members of the Joint Senate Judiciary and Ways and Means Committee

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

Re: Testimony **Support - House Bill (HB) 673, House Draft 2, Senate Draft (SD) 1**, RELATING TO MEDICAL CANNABIS

Dear Chairs, Vice-Chairs, and Members of the Committee:

HEALTH is the trade association made up of the eight (8) licensed medical cannabis dispensaries under Haw. Rev. Stat. (HRS) Chapter 329D. We **support HB673, SD1**. We appreciate the committee's willingness to move this measure forward even though it is amended to deal with just one of the six proposed issues as it came over from the House and has been further amended to include an issue on employment.

Our testimony is in support of the provision on the transfer of licenses, and we take no position on the issue of employment protections.

### SALE OR TRANSFER OF LICENSE

While licensed medical cannabis dispensaries are still a new and emerging industry since their establishment in 2015, most production centers and retail facilities have only been operating for several months and less than 2 years.

However, there are already instances of the leadership within a licensed dispensary having changed. The current law does not provide for a process for a transfer or sale of any significant interest in the licensed dispensary entities and applicants. As such, SECTION 3 of the bill proposes to create a process for the individual who applied for and is the recognized initial "applicant," to transfer their interest if it is an involuntary circumstance (death, disability, incapacity), or to notify the Department of Health (DOH) of an intention to sell or transfer voluntarily, all of which is subject to the DOH's approval



to ensure that any new individual would meet the qualifications required under the law for the initial applicant.

Thank you for your consideration.

**HB-673-SD-1**

Submitted on: 4/1/2019 6:45:05 PM

Testimony for JDC on 4/3/2019 10:00:00 AM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Michael Golojuch Jr	Testifying for LGBT Caucus of the Democratic Party of Hawaii	Support	Yes

Comments:

Aloha Representatives,

The LGBT Caucus of the Democratic Party of Hawaii supports the passage of HB 673 HD2 SD1.

Mahalo for your consideration and for the opportunity to testify. Mahalo,

Michael Golojuch, Jr.

Chair

LGBT Caucus of the Democratic Party of Hawaii

**HB-673-SD-1**

Submitted on: 4/2/2019 11:49:05 AM

Testimony for JDC on 4/3/2019 10:00:00 AM

**LATE**

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Chandy Lopes	Testifying for Hawaii Society of Naturopathic Physicians	Support	No

Comments:

To: Chair Karl Rhoads  
Vice Chair Glenn Wakai  
Members of the Senate Committee on Judiciary



Chair Donovan M. Dela Cruz  
Vice Chair Gilbert S.C. Keith-Agaran  
Members of the Senate Committee on Ways and Means

From: Dr. Terisa Jackson

Re: HB637, Relating to Medical Cannabis  
April 3, 2019 at 10:00 am, Conference Room 211

Position: Support with comments- REQUEST FOR AMENDMENT

- I am a naturopathic physician practicing in Kihei, Hawaii for the past 6 years.
- Please add naturopathic physicians should back into this bill as it was originally filed. The concerns that caused naturopathic physicians to be removed from the bill have been addressed.
- Naturopathic physicians in Hawaii have many patients who qualify for medical cannabis who currently need to be referred to other practitioner types for written certification of a debilitating medical condition for the medical use of cannabis, with whom the patient may not have a bona-fide physician-patient relationship.
- Thousands of people in Hawaii have a naturopathic physician as their primary care provider.
- Given the recognized shortage of health care providers in Hawaii, passage of this bill would improve the adequacy of patient access to medical cannabis.
- Naturopathic physicians have significantly more training than APRNs, who already are authorized to provide certification for the use of medical cannabis.
- Naturopathic physicians are the most highly trained experts in herbal medicine in the world, and are therefore the best qualified to provide patients with safe and reliable information regarding the use of medical cannabis.
- Naturopathic physicians are authorized to certify for medical cannabis in other states, such as Oregon, Washington, Arizona and Vermont.

Thank you for the opportunity to testify on this bill.

Terisa M. Jackson, ND  
MediSpa Maui, Kihei, HI



**HB-673-SD-1**

Submitted on: 4/2/2019 9:26:13 AM

Testimony for JDC on 4/3/2019 10:00:00 AM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Dan Morris	Individual	Oppose	No

Comments:

Honorable Chairs, Vice Chairs and Committee members:

I am submitting testimony in opposition to HB 673 HD2 SD1, in its current version. I would support passage of the bill, with addition of the amendments suggested below. This bill was gutted and re-written by CPH. Previously, it passed through the House committees that it was assigned to with the following language, which included physician assistants (PAs), and was the original intent of the bill.

**BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:**

**SECTION 1.** The legislature finds that Act 241, Session Laws of Hawaii 2015, codified as chapter 329D,

Hawaii Revised Statutes, established a licensing framework for a statewide system of medical cannabis

dispensaries to ensure access to medical cannabis for qualifying patients. Act 230, Session Laws of

Hawaii 2016, Act 41, Session Laws of Hawaii 2017, and Act 116, Session Laws of Hawaii 2018, made

further amendments.

The legislature further finds that additional amendments to the law are warranted to clarify legislative

intent, to ensure smooth administration of the law, to allow for adequate patient access to medical

cannabis, and to resolve issues that have arisen under the current law.

The purpose of this Act is to:

(1) Allow physician assistants practicing under supervision to provide written certification for qualifying

patients to improve patient access to medical cannabis;

(2) Allow licensed dispensaries to have manufacturing or processing centers separate from their

production facilities, while remaining subject to all regulations under the law;

(3) Provide a process for the voluntary or involuntary sale or transfer of a dispensary license;

(4) Allow dispensaries to operate on state and federal holidays;

(5) Allow a licensed dispensary to purchase medical cannabis or manufactured cannabis products from



another licensed dispensary, with approval from the department of health, to ensure patient access to cannabis in the event of a crop failure; and  
(6) Allow licensed retail dispensaries to sell edible cannabis and cannabidiol products.

Why CPH chose to remove PAs from the bill is uncertain, but seems to be in line with a pattern of allowing APRNs privileges that PAs should also have. Note that APRNs can already certify patients as eligible for medical marijuana certificates. APRNs and PAs are nationally on par. Both are primary care providers under Medicare guidelines. In Hawaii, PAs and APRNs are recognized by Medicaid and HMSA as primary care providers in the Primary Care Medical Home (PCMH) model. The version of this bill that should be passed is HB 673 HD2. If your committees want to keep the language added by CPH that is certainly within your discretion.

Qualifying patient; employment; employees; employers; nondiscrimination; prohibitions. (a) An employer shall not: (1) Discriminate against a person in hiring, termination, or imposing any term or condition of employment or otherwise penalize a person based on that person's status as a qualifying patient; or (2) Take action against an employee solely based upon the employee's status as a qualifying patient or if the results of such employee's drug test show positive for cannabis or its components;

Re-writing by CPH also seems to be a pattern seen this session, especially with regard to PA

practice and can also be seen in the re-write of SB 1406 regarding PA practice, which added restrictions on PA practice that were not previously in place.

None the less, CPH's re-write of this bill (HB 673 HD2 SD1) should be allowed to move forward without amendments that would restore the original intent of the bill.

CPH should not be allowed to distort the original intent of this bill, which they are doing by eliminating PAs from the language of the bill. Please amend this bill to include original language including PAs, as was the original intent of the bill.

Thank you for your time and consideration of this testimony.

Dan Morris, PA-c

**HB-673-SD-1**

Submitted on: 4/2/2019 6:39:41 AM

Testimony for JDC on 4/3/2019 10:00:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
alisha wallace	Individual	Oppose	No

Comments:

Why CPH chose to remove PAs from the bill is uncertain, but seems to be in line with a pattern of allowing APRNs privileges that PAs should also have. Note that APRNs can already certify patients as eligible for medical marijuana certificates. APRNs and PAs are nationally on par. Both are primary care providers under Medicare guidelines. In Hawaii, PAs and APRNs are recognized by Medicaid and HMSA as primary care providers in the Primary Care Medical Home (PCMH) model.

The version of this bill that should be passed is HB 673 HD2. If your committees want to keep the language added by CPH that is certainly within your discretion.

"§378- Qualifying patient; employment; employees; employers; nondiscrimination; prohibitions. (a) An employer shall not: (1) Discriminate against a person in hiring, termination, or imposing any term or condition of employment or otherwise penalize a person based on that person's status as a qualifying patient; or (2) Take action against an employee solely based upon the employee's status as a qualifying patient or if the results of such employee's drug test show positive for cannabis or its components; Gutting and re-writing by CPH also seems to be a pattern seen this session, especially with regard to PA practice and can also be seen in the re-write of SB 1406 regarding PA practice, which added restrictions on PA practice that were not previously in place. Whether this is a pattern of behavior by CPH against physician assistants is outside the scope of this testimony.

None the less, CPH's re-write of this bill (HB 673 HD2 SD1) should be allowed to move forward without amendments that would restore the original intent of the bill.

CPH should not be allowed to distort the original intent of this bill, which they are doing by eliminating PAs from the language of the bill. Please amend this bill to include original language including PAs, as was the original intent of the bill.

Thank you for your time and consideration of this testimony.

Alisha Wallace, PA-C



**HB-673-SD-1**

Submitted on: 4/2/2019 9:00:29 AM

Testimony for JDC on 4/3/2019 10:00:00 AM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Kathleen Elliott	Individual	Oppose	No

Comments:

I am writing to submit testimony in opposition to HD 673 HD2 SD1 in its current form. The bill needs to be amended to add PAs back into the language of the bill. Please return this bill to its original language adding Physician Assistants (PA) to the bill so PAs can provide written certification for qualifying patients to improve patient access to medical cannabis. Physician assistants are highly trained medical providers nation wide with extensive education and clinical skills already providing excellent medical care to patients in Hawai'i.

Please review this bill before passing. Thank you. Kathleen Elliott, PA-C Honolulu

**HB-673-SD-1**

Submitted on: 4/2/2019 9:04:45 AM

Testimony for JDC on 4/3/2019 10:00:00 AM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
David Jones, MD	Individual	Comments	No

Comments:

I am writing to submit testimony in opposition to HD 673 HD2 SD1 in its current form. The bill needs to be amended to add PAs back into the language of the bill. Please return this bill to its original language adding Physician Assistants (PA) to the bill so PAs can provide written certification for qualifying patients to improve patient access to medical cannabis. Physician assistants are highly trained medical providers with extensive education and clinical skills and are already providing excellent medical care to patients in Hawai'i. I have worked with many PAs in my 30+ years of medical practice in Hawai'i and they are more than capable of providing this service and should be included in this bill.

Please review this bill before passing. Thank you. David R Jones, MD Honolulu

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# A BILL FOR AN ACT

RELATING TO MEDICAL CANNABIS.

**BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:**

**The committee on JDC/WAM has added the measure to decision making scheduled on 04-03-19 10:00AM in conference room 211.**

Honorable Chairs, Vice Chairs and Committee members:

I am submitting testimony in opposition to HB 673 HD2 SD1, in its current version.

I would support passage of the bill, with addition of the amendments suggested below.

**This bill was gutted and re-written by CPH.** Previously, it passed through the House committees that it was assigned to with the following language, which included physician assistants (PAs), and was the original intent of the bill.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:

SECTION 1. The legislature finds that Act 241, Session Laws of Hawaii 2015, codified as chapter 329D, Hawaii Revised Statutes, established a licensing framework for a statewide system of medical cannabis dispensaries to ensure access to medical cannabis for qualifying patients. Act 230, Session Laws of Hawaii 2016, Act 41, Session Laws of Hawaii 2017, and Act 116, Session Laws of Hawaii 2018, made further amendments.

The legislature further finds that additional amendments to the law are warranted to clarify legislative intent, to ensure smooth administration of the law, to allow for adequate patient access to medical cannabis, and to resolve issues that have arisen under the current law.

The purpose of this Act is to:

- (1) Allow **physician assistants** practicing under supervision to provide written certification for qualifying patients to improve patient access to medical cannabis;
- (2) Allow licensed dispensaries to have manufacturing or processing centers separate from their production facilities, while remaining subject to all regulations under the law;
- (3) Provide a process for the voluntary or involuntary sale or transfer of a dispensary license;
- (4) Allow dispensaries to operate on state and federal holidays;
- (5) Allow a licensed dispensary to purchase medical cannabis or manufactured cannabis products from another licensed dispensary, with approval from the department of health, to ensure patient access to cannabis in the event of a crop failure; and
- (6) Allow licensed retail dispensaries to sell edible cannabis and cannabidiol products.

Why CPH chose to remove PAs from the bill is uncertain, but seems to be in line with a pattern of allowing APRNs privileges that PAs should also have. Note that APRNs can already certify patients as eligible for medical marijuana certificates. APRNs and PAs are nationally on par. Both are primary care providers under Medicare guidelines. In Hawaii, PAs and APRNs are recognized by Medicaid and HMSA as primary care providers in the Primary Care Medical Home (PCMH) model.

The version of this bill that should be passed is HB 673 HD2. If your committees want to keep the language added by CPH that is certainly within your discretion.

"§378- Qualifying patient; employment; employees; employers; nondiscrimination; prohibitions. (a) An employer shall not: (1) Discriminate against a person in hiring, termination, or imposing any term or condition of employment or otherwise penalize a person based on that person's status as a qualifying patient; or (2) Take action against an employee solely based upon the employee's status as a qualifying patient or if the results of such employee's drug test show positive for cannabis or its components;

Cutting and re-writing by CPH also seems to be a pattern seen this session, especially with regard to PA practice and can also be seen in the re-write of SB 1406 regarding PA practice, which added restrictions on PA practice that were not previously in place. Whether this is a pattern of behavior by CPH against physician assistants is outside the scope of this testimony.

None the less, CPH's re-write of this bill (HB 673 HD2 SD1) should be allowed to move forward without amendments that would restore the original intent of the bill.

CPH should not be allowed to distort the original intent of this bill, which they are doing by eliminating PAs from the language of the bill. Please amend this bill to include original language including PAs, as was the original intent of the bill.

Thank you for your time and consideration of this testimony.

Fielding Mercer, PA-C

Past president and legislative liaison 2008 – 2016 – Hawaii Academy of Physician Assistants

**HB-673-SD-1**

Submitted on: 4/2/2019 11:36:51 AM

Testimony for JDC on 4/3/2019 10:00:00 AM

**LATE**

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Nanea Lo	Individual	Support	No

Comments:

Hello,

I am writing in on STRONG SUPPORT of this bill. Today, employers can fire medical cannabis patients just for being such a patient OR if they fail a drug test. There is no need to show impairment. Patients should not have to choose between using a medicine that their health care professional has determined is right for them and keeping a job to put food on the table.

Thank you,

Nanea Lo



**LATE**

**HB-673-SD-1**

Submitted on: 4/2/2019 12:00:49 PM

Testimony for JDC on 4/3/2019 10:00:00 AM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Marsha Lowery ND	Individual	Comments	No

Comments:

I am a naturopathic physician practicing on Maui for 7 years. Please add naturopathic physicians back into this bill as it was originally filed.

- Naturopathic physicians in Hawaii have many patients who qualify for medical cannabis who currently need to be referred to other practitioner types for written certification of a debilitating medical condition for the medical use of cannabis, with whom the patient may not have a bona-fide physician-patient relationship.
- Naturopathic physicians are the most highly trained experts in herbal medicine in the world, and are therefore the best qualified to provide patients with safe and reliable information regarding the use of medical cannabis.
- Naturopathic physicians are authorized to certify for medical cannabis in other states.

**HB-673-SD-1**

Submitted on: 4/2/2019 12:09:52 PM

Testimony for JDC on 4/3/2019 10:00:00 AM



Submitted By	Organization	Testifier Position	Present at Hearing
Carrie Brennan, N.D.	Individual	Support	No

Comments:

Dear Committee members,

I ask that naturopathic physicians be added back on HB 673.

I am a naturopathic physician practicing in Hawaii for the past 15 years in Kapaa. Naturopathic physicians have significantly more training than physician assistants, who, with passage of this bill, would also be authorized to provide the necessary certification for medical cannabis use. Naturopathic physicians have significantly more training than APRNs, who already are authorized to provide certification for the use of medical cannabis.

Naturopathic physicians are the most highly trained experts in herbal medicine in the world, and are therefore the best qualified to provide patients with safe and reliable information regarding the use of medical cannabis. Naturopathic physicians are authorized to prescribe medical cannabis in other states, such as Arizona and Vermont.

For this bill to effectively allow naturopathic physicians to provide certification for medical cannabis use, three amendments will need to be made to this bill:

1. Naturopathic physicians licensed in Hawaii will need to be authorized to obtain a Drug Enforcement Agency (DEA) number
2. Naturopathic physicians licensed in Hawaii will need to be authorized to obtain a Hawaii Controlled Substance License.
3. The Hawaii naturopathic formulary will need to be amended to include controlled substances. The Board of Naturopathic Medicine will then need to add medical cannabis to its list of approved formulary items.

Thank you for the opportunity to testify on this bill.

Sincerely,

Carrie Brennan, ND

**LATE**

**HB-673-SD-1**

Submitted on: 4/2/2019 12:17:19 PM

Testimony for JDC on 4/3/2019 10:00:00 AM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Sharon Guillermo	Individual	Support	No

Comments:

To: â€‹Chair Karl Rhoads

â€‹Vice Chair Glenn Wakai

â€‹Members of the Senate Committee on Judiciary

â€‹Chair Donovan M. Dela Cruz

â€‹Vice Chair Gilbert S.C. Keith-Agaran

Members of the Senate Committee on Ways and Means

From:â€‹ Sharon Brown Guillermo, LMT,

Re:â€‹HB637, Relating to Medical Cannabis

April 3, 2019 at 10:00 am, Conference Room 211

Position: Support with comments- REQUEST FOR AMENDMENT

- I am a licensed massage therapist practicing in Kailua Kona, Hawaii for the past 22years.

- Please add naturopathic physicians should back into this bill as it was originally filed. The concerns that caused naturopathic physicians to be removed from the bill have been addressed.

- Naturopathic physicians in Hawaii have many patients who qualify for medical cannabis who currently need to be referred to other practitioner types for written certification of debilitating medical condition for the medical use of cannabis, with whom the patient may not have a bona-fide physician-patient relationship.
- Thousands of people in Hawaii have a naturopathic physician as their primary care provider.
- Given the recognized shortage of health care providers in Hawaii, passage of this bill would improve the adequacy of patient access to medical cannabis.
- Naturopathic physicians have significantly more training than APRNs, who already are authorized to provide certification for the use of medical cannabis
- Naturopathic physicians are the most highly trained experts in herbal medicine in the world, and are therefore the best qualified to provide patients with safe and reliable information regarding the use of medical cannabis.
- Naturopathic physicians are authorized to certify for medical cannabis in other states, such as Oregon, Washington, Arizona and Vermont.

Thank you for the opportunity to testify on this bill.

**HB-673-SD-1**

Submitted on: 4/2/2019 12:53:28 PM

Testimony for JDC on 4/3/2019 10:00:00 AM

**LATE**

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
vincent tenorio	Individual	Support	No

Comments:

I am a Physician Assistant and in full support of Physicians being able to prescribe marijuana.

To: COMMITTEE ON JUDICIARY  
Senator Karl Rhoads, Chair

COMMITTEE ON WAYS AND MEANS  
Senator Donovan M. Dela Cruz, Chair

**LATE**

From: Precilia Calimlim  
Student of PH641 Advanced Policy, University of Hawai'i at Mānoa  
precilia@Hawai'i.edu

DATE: Wednesday, April 3, 2019

TIME: 10:00 am

PLACE: Conference Room 211, State Capitol 415, South Beretania Street

HB673, HD2, SD1  
RELATING TO MEDICAL CANNABIS.

Provides a process for the voluntary or involuntary sale or transfer of an individual dispensary license. Prohibits an employer from discriminating against a person in hiring, termination, or conditions of employment based on the person's status as a qualifying patient and from taking action against an employee based solely on the employee's status as a qualifying patient or if the results of the employee's drug test are positive for cannabis, subject to certain exceptions. Specifies permissible and impermissible actions by employers and employees. (SD1)

Dear Chairs Rhoads, Dela Cruz and respective Committee Members:

I am providing testimony as an interested individual in **support** of HB673, HD2, SD1.

Hawai'i, in all respects, is geographically isolated and yet surrounded by world travelers at the same time. Access to medical cannabis for qualified patients with eligible debilitating medical conditions should always continue to be a health priority. With the program updates of allowing Out-of-State Patients to purchase medical cannabis on March 5, 2019, it is even more crucial that dispensaries are available for patients to access their prescribed medication without interruption.

Allowing the sale or transfer of a dispensary license ensures continuity of patients to access their prescribed medication without interruption. I believe this is appropriately addressed by §329D. With a limited number of dispensaries (9), to service the entire state of Hawai'i and now out-of-state patients, the state must ensure to meet the medical needs of qualified patients. Supply must meet demand.

Regarding § 378, discrimination on any level should never be tolerated. For an employer to discriminate against a person in hiring, termination, or conditions of employment based on the person's status as a qualifying patient should be illegal. Being able to perform a job well, should be the sole criteria to determine a person's employment or continued employment.

Thank you for the opportunity to testify.

**LATE**

**From:** [Allison Bishop](#)  
**To:** [JDCTestimony](#)  
**Subject:** HB673 Support  
**Date:** Tuesday, April 2, 2019 12:29:13 PM

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Dear Chairs Rhoads & Dela Cruz, Vice Chairs Wakai & Keith-Agaran, Committee Members:  
This bill is particularly important to current and prospective medical cannabis patients here in Hawai'i. Currently, their employers can fire them or refuse them promotion just because they choose to use this state-approved form of medicine. This is unjust and will push people to choose between more dangerous drugs or losing a job they need to put food on the table for their family. There also needs to be better access for patients to edibles for patients in Hawaii. Right now we are on our own with making our own and hoping the dose is correct according to advice from patient advocates etc. it is important to add edible medicine for those who can not or should not ingest by inhaling. Please pass this out of your committees. Mahalo.  
Allison



**From:** [cloudia charters](#)  
**To:** [JDCTestimony](#)  
**Subject:** HB673 Support  
**Date:** Tuesday, April 2, 2019 1:20:34 PM

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Dear Chairs Rhoads & Dela Cruz, Vice Chairs Wakai & Keith-Agaran, Committee Members:

This bill is particularly important to current and prospective medical cannabis patients here in Hawai'i. surely we are capable of finding common sense accommodations for employers and patients as well as neighbors and landlords. Also, edibles are a boon to many patients with PROPER regulations and patients education.

Please pass this bill out of your committees.

Mahalo Nui Loa, Rev. Cloudia Charters



**From:** [Tyler Zane](#)  
**To:** [JDCTestimony](#)  
**Subject:** HB673 Support  
**Date:** Tuesday, April 2, 2019 1:29:29 PM



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Dear Chairs Rhoads & Dela Cruz, Vice Chairs Wakai & Keith-Agaran, Committee Members:

This bill is particularly important to current and prospective medical cannabis patients here in Hawai'i.

Currently, their employers can fire them or refuse them promotion just because they choose to use this state-approved form of medicine.

This is unjust and will push people to choose between more dangerous drugs or losing a job they need to put food on the table for their family.

Please pass this out of your committees.

Mahalo.

Tyler Zane

**HB-673-SD-1**

Submitted on: 4/2/2019 2:31:00 PM

Testimony for JDC on 4/3/2019 10:00:00 AM

**LATE**

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
David H Messer III, PA-C	Individual	Oppose	No

Comments:

**From:** [Cheryl Sederberg](#)  
**To:** [JDC Testimony](#)  
**Subject:** HB673 Support  
**Date:** Tuesday, April 2, 2019 2:43:31 PM

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Dear Chairs Rhoads & Dela Cruz, Vice Chairs Wakai & Keith-Agaran, Committee Members:

This bill is particularly important to current and prospective medical cannabis patients here in Hawai'i.

Currently, their employers can fire them or refuse them promotion just because they choose to use this state-approved form of medicine.

This is unjust and will push people to choose between more dangerous drugs or losing a job they need to put food on the table for their family.

Please pass this out of your committees.

Mahalo.

**LATE**

**From:** [CHERYL BUCKMAN](#)  
**To:** [JDCTestimony](#)  
**Subject:** HB673 Support  
**Date:** Tuesday, April 2, 2019 3:24:22 PM

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Dear Chairs Rhoads & Dela Cruz, Vice Chairs Wakai & Keith-Agaran, Committee Members:

This bill is particularly important to current and prospective medical cannabis patients here in Hawai'i.

Currently, their employers can fire them or refuse them promotion just because they choose to use this state-approved form of medicine.

This is unjust and will push people to choose between more dangerous drugs or losing a job they need to put food on the table for their family.

Please pass this out of your committees.

Mahalo.

Sent from my iPhone

**LATE**

**HB-673-SD-1**

Submitted on: 4/2/2019 5:57:34 PM

Testimony for JDC on 4/3/2019 10:00:00 AM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Corinne Maul De Soto	Individual	Support	No

Comments:

To: Chair Karl Rhoads

Vice Chair Glenn Wakai

Members of the Senate Committee on Judiciary

Chair Donovan M. Dela Cruz

Vice Chair Gilbert S.C. Keith-Agaran

Members of the Senate Committee on Ways and Means

From: Dr. Corinne M. De Soto

Re: HB673, Relating to Medical Cannabis

April 3, 2019 at 10:00 am, Conference Room 211

Position: Support with comments- REQUEST FOR AMENDMENT

- I am a naturopathic physician practicing in Kailua Kona, Hawaii for the past 5 years.
- Please add naturopathic physicians should back into this bill as it was originally filed. The concerns that caused naturopathic physicians to be removed from the bill have been addressed.

- Naturopathic physicians in Hawaii have many patients who qualify for medical cannabis who currently need to be referred to other practitioner types for written certification of a debilitating medical condition for the medical use of cannabis, with whom the patient may not have a bona-fide physician-patient relationship.
- Thousands of people in Hawaii have a naturopathic physician as their primary care provider.
- Given the recognized shortage of health care providers in Hawaii, passage of this bill would improve the adequacy of patient access to medical cannabis.
- Naturopathic physicians have significantly more training than APRNs, who already are authorized to provide certification for the use of medical cannabis.
- Naturopathic physicians are the most highly trained experts in herbal medicine in the world, and are therefore the best qualified to provide patients with safe and reliable information regarding the use of medical cannabis.
- Naturopathic physicians are authorized to certify for medical cannabis in other states, such as Oregon, Washington, Arizona and Vermont.

Thank you for the opportunity to testify on this bill.

**LATE**

**HB-673-SD-1**

Submitted on: 4/2/2019 6:16:35 PM

Testimony for JDC on 4/3/2019 10:00:00 AM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Wendy Gibson	Individual	Support	No

Comments:

Aloha Chairs Rhoads and Dela Cruz, Vice Chairs Wakai and Keith-Aragan and Committee Members,

I support HB 673. As a Cannabis Nurse, I am a medical cannabis patient advocate. Of all of our patient populations, this is the one who is discriminated against the most. They have struggled for many years, first to gain access to their medicines and then to keep their jobs, housing, child custody and medical care. We encourage all patients to be as active and able as possible. Many work and would like to continue to work, yet some are faced with having to decide to choose between a job that they love and the only medicine that works for them. I believe it is time to end this discrimination against patients who use medical cannabis and allow them to keep their jobs if they test positive for cannabis. There is NO blood or saliva test that can determine which levels of THC or other cannabinoids are impairing for each individual. Employers must determine how they will decide if an employee is impaired on the job, just as they do for patients who use opioids or other medications. Assessing job performance is one way that employers currently do that.

Thank you for this opportunity to give testimony on this important bill.

Wendy Gibson R.N., American Cannabis Nurse's Association Member

Palolo

To: Chair Karl Rhoads  
Vice Chair Glenn Wakai  
Members of the Senate Committee on Judiciary

Chair Donovan M. Dela Cruz  
Vice Chair Gilbert S.C. Keith-Agaran  
Members of the Senate Committee on Ways and Means

**LATE**

From: Dr. Alysa Nguyen ND

Re: HB673, Relating to Medical Cannabis  
April 3, 2019 at 10:00 am, Conference Room 211

Position: Support with comments- REQUEST FOR AMENDMENT

- I am a naturopathic physician practicing in Honolulu, Hawaii for the past 5 years.
- Please add naturopathic physicians back into this bill as it was originally filed. The concerns that caused naturopathic physicians to be removed from the bill have been addressed.
- Naturopathic physicians in Hawaii have many patients who qualify for medical cannabis who currently need to be referred to other practitioner types for written certification of a debilitating medical condition for the medical use of cannabis, with whom the patient may not have a bona-fide physician-patient relationship.
- Thousands of people in Hawaii have a naturopathic physician as their primary care provider.
- Given the recognized shortage of health care providers in Hawaii, passage of this bill would improve the adequacy of patient access to medical cannabis.
- Naturopathic physicians have significantly more training than APRNs, who already are authorized to provide certification for the use of medical cannabis.
- Naturopathic physicians are the most highly trained experts in herbal medicine in the world, and are therefore the best qualified to provide patients with safe and reliable information regarding the use of medical cannabis.
- Naturopathic physicians are authorized to certify for medical cannabis in other states, such as Oregon, Washington, Arizona and Vermont.

Thank you for the opportunity to testify on this bill.



**HB-673-SD-1**

Submitted on: 4/2/2019 10:09:21 PM

Testimony for JDC on 4/3/2019 10:00:00 AM

**LATE**

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
David Kern	Individual	Support	No

Comments:

I support HB673, in favor of allowing Naturopathic Physicians to provide certification for medical cannabis use. NDs are uniquely educated and trained in the field of medically classified herbal medicine, specifically related to medical cannabis. Cannabis is a substance and herbal medicine that is within the scope of the naturopathic formulary. I know this to be true as a member of the Board of Naturopathic Medicine.

David Kern, ND

**From:** [Georgina M](#)  
**To:** [JDCTestimony](#)  
**Subject:** HB673 Support  
**Date:** Tuesday, April 2, 2019 4:12:45 PM

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**LATE**

Dear Chairs Rhoads & Dela Cruz, Vice Chairs Wakai & Keith-Agaran, Committee Members:

This bill is particularly important to current and prospective medical cannabis patients here in Hawai'i.

Currently, their employers can fire them or refuse them promotion just because they choose to use this state-approved form of medicine.

This is unjust and will push people to choose between more dangerous drugs or losing a job they need to put food on the table for their family.

Please pass this out of your committees.

Mahalo.

**From:** [Marilyn Mick](#)  
**To:** [JDCTestimony](#)  
**Subject:** HB673 Support  
**Date:** Tuesday, April 2, 2019 4:23:54 PM

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**LATE**

Dear Chairs Rhoads & Dela Cruz, Vice Chairs Wakai & Keith-Agaran, Committee Members:

This bill is particularly important to current and prospective medical cannabis patients here in Hawai'i.

Currently, their employers can fire them or refuse them promotion just because they choose to use this state-approved form of medicine.

This is unjust and will push people to choose between more dangerous drugs or losing a job they need to put food on the table for their family.

Please pass this out of your committees.

Mahalo, Marilyn Mick, Honolulu

**From:** [Tatiana Labore](#)  
**To:** [JDCTestimony](#)  
**Subject:** HB673 Support  
**Date:** Tuesday, April 2, 2019 7:24:52 PM

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**LATE**

Dear Chairs Rhoads & Dela Cruz, Vice Chairs Wakai & Keith-Agaran, Committee Members:  
This bill is particularly important to current and prospective medical cannabis patients here in Hawai'i. Currently, their employers can fire them or refuse them promotion just because they choose to use this state-approved form of medicine. This is unjust and will push people to choose between more dangerous drugs or losing a job they need to put food on the table for their family. Please pass this out of your committees. Mahalo.