



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

ON THE FOLLOWING MEASURE:

H.B. NO. 673, RELATING TO MEDICAL CANNABIS.

BEFORE THE:

House Committee on Health

DATE: Tuesday, February 5, 2019 **TIME:** 9:45 a.m.

LOCATION: State Capitol, Room 329

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

Chair Mizuno and Members of the Committee:

The Department of the Attorney General provides comments on this bill.

This measure would: (1) add a section to chapter 329D, Hawaii Revised Statutes (HRS), and amend section 329D-3, HRS, to allow for the sale or transfer of a medical cannabis dispensary license; (2) amend sections 329-121 and 329-122, HRS, to allow a naturopathic physician to certify a qualifying patient for medical use of cannabis; (3) amend section 329-126, HRS, to afford a naturopathic physician certain protections for providing written certification for the medical use of cannabis; (4) amend section 329D-2, HRS, to allow a dispensary licensee to operate up to two separate manufacturing or processing facilities; (5) amend section 329D-6, HRS, to allow a dispensary to purchase medical cannabis and manufactured cannabis products from another dispensary in the event of a crop failure; (6) amend section 329D-8, HRS, to allow the department to consider processes that would allow failed batches of cannabis or manufactured cannabis products to be remediated and manufactured as long as the final product passes testing standards; and (7) amend section 329D-10, HRS, to allow a licensed dispensary to produce edible cannabis and cannabidiol products.

Comments on section 2, allowing for the sale or transfer of a dispensary license.
(page 3, lines 1-18)

This bill adds a section to chapter 329D, HRS, to allow for the sale or transfer of a medical cannabis dispensary license. Currently, section 329D-3, HRS, requires that an individual applicant be a legal resident of the State for not less than five years

preceding the date of application. If the Committee is inclined to move this measure forward, the Department suggests that it clarify whether an individual who obtains a license as a transferee is also required to be a legal resident of the State for “not less than five years preceding” the date of the transfer.

Comments on section 8, allowing up to two separate manufacturing or processing facilities. (page 12, line 6-10)

This bill allows a dispensary licensee to operate up to two separate manufacturing or processing facilities, that would not be considered production centers. Currently, section 329D-16(a), HRS, criminalizes entry into production centers by persons not statutorily authorized to be on the premises. Since the manufacturing or processing facilities would be excluded from the definition of “production center” under this bill, an individual not statutorily authorized to be on the premises could enter into these facilities and face no prosecution for this act. If the Committee is inclined to move this measure forward, the Department suggests that it consider not excluding these proposed separate manufacturing or processing facilities from the definition of “production center.” The Department believes that entry by unauthorized individuals into any cannabis production facility should be classified as a criminal offense. This would serve to deter the diversion of medical cannabis, which is regulated for reasons of public safety and remains a Schedule I substance under the federal Controlled Substances Act (CSA).

Comments on section 10, allowing purchase by one dispensary from another. (page 17, lines 20-21; page 21, line 18; page 22, lines 12-13; page 23, line 15, through page 24, line 16)

This bill allows a dispensary to purchase medical cannabis and manufactured cannabis products from another dispensary in the event of a crop failure. The proposed wording does not require dispensaries to track the product they sell to or purchase from another dispensary, nor does it require that a dispensary destroy any failed product. The Department suggests that the Committee amend the proposed wording as follows: (1) require the computer software tracking system outlined in section 329D-6(j), HRS, to collect data regarding the total amount of cannabis and manufactured cannabis

products sold from one dispensary to another; and (2) require that a dispensary destroy any failed product. This will maintain consistency in the controls currently in place for dispensaries.

Comments on section 12, allowing a dispensary to produce edible cannabis.

(page 28, lines 3-17)

The measure amends section 329D-10, HRS, to allow a licensed dispensary to produce edible cannabis and cannabidiol products. The proposed wording presents several concerns. First, it does not specify where the manufacture of edible cannabis products would be permitted, nor does it specify minimum manufacturing standards. Secondly, it does not remove edible cannabis products from the definition of “food” in chapter 328, HRS, which would prohibit its production because the addition of cannabinoids would render the product adulterated. If the Committee is inclined to allow the production of edible cannabis products, we suggest it make the following changes: (1) prohibit the production of manufactured cannabis products in a commercial kitchen used for the preparation of other food to avoid the adulteration of other food products, (2) set forth minimum production standards, and (3) remove edible cannabis products from the definition of “food” in chapter 328, HRS.

The Department of the Attorney General respectfully recommends that, if the Committee moves this measure forward, that it consider the foregoing suggestions.

Testimony of the Board of Naturopathic Medicine

**Before the
House Committee on Health
Tuesday, February 5, 2019
9:45 a.m.
State Capitol, Conference Room 329**

**On the following measure:
H.B. 673, RELATING TO MEDICAL CANNABIS**

Chair Mizuno and Members of the Committee:

My name is Christopher Fernandez, and I am the Executive Officer of the Board of Naturopathic Medicine (Board). The Board has not had an opportunity to review and discuss this bill but will do so at its publicly noticed meeting on February 15, 2019.

The purposes of this bill are to: (1) allow naturopathic physicians and physician assistants to provide written certification for qualifying patients; (2) allow licensed dispensaries to have up to two additional manufacturing or processing facilities separate from their production facilities; (3) provide a process for the voluntary or involuntary sale or transfer of an individual dispensary license; (4) allow retail 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 department approval, in the event of a crop failure; (6) allow remediation of any cannabis batch that fails laboratory testing standards as long as any final product passes such standards; and (7) allow licensed retail dispensaries to sell edible cannabis and cannabidiol products.

Thank you for the opportunity to testify on this bill.



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

**Testimony COMMENTING on HB0673
RELATING TO MEDICAL CANNABIS.**

REPRESENTATIVE JOHN M. MIZUNO, CHAIR
HOUSE COMMITTEE ON HEALTH

Hearing Date: Tuesday, February 05, 2019 Room Number: 329

1 **Fiscal Implications:** Cannot be determined at this time.

2 **Department Testimony:** Thank you for the opportunity to COMMENT on this measure. The
3 Department SUPPORTS some provisions with clarifications, definitions, and recommended
4 language changes, OPPOSES other provisions, and asks for clarification on others.

5 In summary, this measure would:

- 6 1. Allow for transfer of ownership of a dispensary license in specified circumstances;
- 7 2. Allow naturopathic physicians and physician assistants to certify patients as having
8 qualifying debilitating medical conditions;
- 9 3. Allows use of medical cannabis in private rooms in a state-licensed assisted living facility
10 (ALF);
- 11 4. Allows each dispensary licensee up to two separate manufacturing or processing facilities
12 in addition to the two production centers currently allowed;
- 13 5. Allows licensed dispensaries to open their retail locations on state and federal holidays.
- 14 6. Allows for dispensary-to-dispensary sales of medical cannabis and manufactured cannabis
15 products in the event of a crop failure of cannabis plants;

- 1 7. Permits the Department to consider processes that allow remediation and manufacturing of
2 cannabis or manufactured cannabis products that fail testing standards; and
- 3 8. Adds edible cannabis products and cannabidiol (CBD) products to the types of medical
4 cannabis products that may be manufactured and distributed by licensed dispensaries.

5

6 The Department responds to each proposal as follows:

7 Transfer of Ownership: The Department SUPPORTS this provision with one amendment:

8 The Department shall retain discretionary authority to deny a request for a transfer of ownership
9 unless the individual meets all the requirements of Section 329D HRS for ownership.

10 Adding Certifying Professionals: The Department OPPOSES the addition of naturopathic
11 physicians. The Department recognizes that patients may have difficulties accessing physicians
12 or APRNs. However, certifying physicians and APRNs are required by Section 329-121 HRS
13 and Section 457-8.6 HRS, respectively, to have controlled substances prescriptive authority.
14 Naturopaths cannot obtain controlled substances prescriptive authority.

15 The Department, however, SUPPORTS the addition of “physician assistants under
16 supervision” to certify patients with debilitating medical conditions for the medical use of
17 cannabis. Physician assistants may register under Section 329-32 HRS and they are allowed
18 prescriptive authority of controlled substances.

19 Use of Medical Cannabis in an Assisted Living Facility: The Department OPPOSES this
20 proposal. All state licensed facilities should be allowed to determine their own policies for the
21 safety, general health, and comfort of their residents and patients. For example, the language of
22 the provision, “shall not be prohibited from use of cannabis,” leaves open the possibility of

1 smoking and raises safety issues regarding disabled persons' ability to self-evacuate in event of
2 an accidental fire resulting from a lighted or discarded match or a lighted joint.

3 Additional Manufacturing and Processing Centers: The Department provides
4 COMMENTS and requests clarification as to the distinction between "manufacturing or
5 processing facilities" and "production centers" and the purpose of the additional centers.
6 Currently, both cultivation and manufacturing are allowed within medical cannabis "production
7 centers." If the intent is to differentiate and allow operations to be maintained separately and to
8 allow up to two (2) additional facilities, the Department suggests changing the term "production
9 center" to "production location" and adding two new terms and definitions as follows:

- 10 1. "Production location" means the physical location by address or tax map key
11 (TMK) where cultivation and manufacturing occur;
- 12 2. "Cultivation centers" means enclosed indoor facilities at production locations
13 where medical cannabis is grown and harvested; and
- 14 3. "Manufacturing or processing centers" means enclosed indoor facilities at
15 production locations where harvested cannabis is processed into manufactured
16 medical cannabis products, and packaged and stored for retail sale.

17 The Department also recommends that these facilities meet all County zoning and building
18 code requirements just as current production centers are required.

19 One final comment on increasing the number of production facilities, the proposed increase
20 will increase the total number of facilities to monitor and inspect by 50%. To maintain the
21 current level of oversight, the Department would require at least one additional inspector position
22 for this purpose. However, this position and funding are not in the Governor's budget.

1 Retail Sales Days of Operation: The Department SUPPORTS this provision so long as
2 dispensary open hours for retail sales remain between 8:00 a.m. and 8:00 p.m., Hawaii-Aleutian
3 Standard Time, Monday through Sunday.

4 Dispensary to Dispensary Sales: The Department OPPOSES this proposal as it conflicts
5 with the very purposeful vertical system designed by the Legislature and increases the risk of
6 federal intervention. Inter-island transportation of cannabis and cannabis manufactured products
7 is subject to federal law. Currently, certified testing laboratories transport samples inter-island
8 for the purpose of quality assurance testing; however, the quantities transported are limited.
9 Even so, samples are, on occasion, confiscated by federal authorities. This proposal would allow
10 transporting of much larger volumes of cannabis and/or cannabis manufactured products and
11 significantly increases the risk of confiscation and possibly enforcement on criminal trafficking
12 of cannabis by both the sending and receiving dispensaries.

13 Remediation: The Department OPPOSES this proposal as unnecessary. A dispensary
14 licensee is allowed to sell final cannabis and manufactured cannabis products that meet the
15 testing requirements set out in Chapter 11-850 HAR.

16 Edibles and CBD Products: The Department OPPOSES allowing edible products. The
17 Department has continued concerns on patient, product, and public safety. Dosing levels and
18 dosing consistency is not well established, absorption rates differ among individuals, and certain
19 edibles could be attractive to minors such as baked goods and candies.

20 However, regarding the addition of CBD products to the types of medical cannabis
21 products that may be manufactured and distributed by dispensaries, the Department asks for
22 clarification. CBD is a naturally occurring compound in cannabis plants, albeit the proportion of

1 CBD to THC and other compounds vary by plant strain. Therefore, licensees are already
2 allowed to manufacture and sell products containing CBD. If this proposal is intended to allow
3 licensees to dispense 3rd party manufactured CBD products, the Department would SUPPORT
4 the proposal with requirements that:

- 5 1. Section 329D HRS be amended to allow licensed dispensaries to sell CBD
6 products not manufactured by the licensee;
- 7 2. Licensed dispensaries clearly label 3rd party products to indicate that 3rd party
8 products are not manufactured by the licensee;
- 9 3. Licensed dispensaries ensure that products meet all laboratory standards required
10 for licensee-manufactured products; and
- 11 4. Licensed dispensaries ensure that products meet all other requirements of Section
12 329D HRS on potency limitation, packaging, and other requirements.

13

14 Thank you for the opportunity to testify on this measure.

15 **Offered Amendments:** As described above.

To: Chair John M. Mizuno
Vice Chair Bertrand Kobayashi
Members of the Committee on Health

From: Michael Traub, ND
Legislative Committee Chair
Hawaii Society of Naturopathic Physicians

Re: HB637, Relating to Medical Cannabis
February 5, 2019 at 9:45 am, Conference Room 329

Position: STRONG SUPPORT

- I am a naturopathic physician practicing in Hawaii for the past 34 years in Kailua Kona, and currently serve as Legislative Committee Chair for the Hawaii Society of Naturopathic Physicians.
- 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 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 Oregon, Washington, 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,

A handwritten signature in black ink, appearing to read "Michael Traub", with a long horizontal flourish extending to the right.

Michael Traub, ND, DHANP, FABNO



HAWAII EDUCATIONAL ASSOCIATION FOR LICENSED THERAPEUTIC HEALTHCARE

To: Representative John Mizuno, Chair
Representative Bertrand Kobayashi, Vice-Chair
Members of the House Health Committee

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

Re: Testimony **In Strong Support** on **House Bill (HB) 673**
RELATING TO MEDICAL CANNABIS

Dear Chairs Mizuno, Vice-Chair Kobayashi, 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** as an important bill for the dispensary industry in order to enhance the medical cannabis dispensary program with additional patient access, product controls and safety, and provide improvements to the administration of the program.

(1) SALE OR TRANSFER OF LICENSE

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

However, there have already been 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 2 of the bill proposes to create a process for 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.

(2) NATUROPATHIC PHYSICIANS



SECTIONS 3 – 7 of the bill propose to increase patient access by allowing naturopathic physicians to provide written certification for qualifying patients. The current law allows physicians or advance practice registered nurses to provide written certifications and to also be afforded certain protections in their professional roles in doing so. In many rural areas, we believe that access to such professional can be a challenge, and many patients prefer to see alternative medicine providers like naturopaths. As such, we believe that allowing naturopaths to certify qualified patients will improve patient access to medical cannabis

(3) ASSISTED LIVING FACILITIES

SECTION 4 of the bill would expressly authorize a qualifying patient to use medical cannabis in private rooms or residences located in a state-licensed assisted living facility. It is our understanding from patients that there are some facilities that prohibit them from using their medical cannabis. As many of our qualifying patients are elderly, are suffering from debilitating illnesses or conditions that constitute a qualifying condition, we believe clarification in the law is necessary to ensure that these patients have proper and equal access to their medicine.

(4) SEPARATE PROCESSING FACILITIES FROM PRODUCTION FACILITIES

SECTION 8 of the bill proposes to allow licensed dispensaries to have manufacturing or processing facilities separate from their production facilities, while remaining subject to all regulations under the law. The current law only allows two (2) production facilities, and so having a processing facility under the current law would be required to be one of the two, or combined with, a production facility.

However, this is not feasible, especially if there is a move to allow edible products. There are regulatory issues and burdens with processing facilities that are not compatible with the location of production facilities. For example, if medical cannabis is made into an edible product, this would be required to be made and processed in a commercial kitchen for food safety purposes. These standards include infrastructure like grease traps, walk-in refrigeration and other standards that are not allowed or compatible on agricultural lands where a production facility would be located. Simply stated, a commercial kitchen will not be permitted on agriculture land.

As such, the bill proposes to separate out processing facilities from production centers, but all still subject these processing facilities to the DOH's authority.



(5) STATE AND FEDERAL HOLIDAYS

SECTION 10 of the bill proposes to delete the current prohibition, and instead, would allow licensed retail dispensary locations to operate on state and federal holidays. As medical cannabis is recognized as medicine, there seems to be no reasonable justification to deny patient's access to such medicine on a holiday. It is our understanding that the DOH is agreeable with this change.

(6) CROP FAILURE SAFEGUARD FOR PATIENT ACCESS AND INTRASTATE TRANSPORT

SECTIONS 9 and 10 of the bill allows a licensed dispensary to purchase medical cannabis or manufactured cannabis products from another licensed dispensary, with approval from the DOH to ensure patient access to cannabis in the event of a crop failure. The bill also proposes to authorize intrastate transport for this purpose.

Other states have created a provision so that in the event of a crop failure or other foreseeable circumstance that devastates or eliminates an entire cannabis crop for a dispensary, there is an alternative safeguard by which a licensed dispensary can purchase from another dispensary to ensure that their patients continue to have access to their medical cannabis. This is especially important for counties such as Kauai which only have one licensed dispensary, or Hawaii Island where the dispensaries could be located far away from one another. All transactions would be monitored and regulated by the DOH.

In order for this process to be implemented though, changes and clarification to the allowance for inter-island transport would need to be made.

The law on transport appears to be uncertain. See the following article in the Boston Globe. :<https://www.bostonglobe.com/business/2017/10/25/state-eyes-flight-rule-ship-marijuana-islands/WDMRa9NnyyIZ5Z301Oc0AK/story.html>

While there is an old law that MAY permit transport, there is also some opinion that a state law authorizing such transport is necessary. The 1972 Federal Aviation Administration (FAA) rule that bans pilots from operating aircraft with illegal substances on board specifies that it “does not apply to any . . . marihuana, . . . authorized by or under any Federal or State statute or by any Federal or State agency.”¹

¹ Title 14: Aeronautics and Space

PART 91—GENERAL OPERATING AND FLIGHT RULES

Hawai'i Educational Association for Licensed Therapeutic Healthcare (HEALTH)

220 S King St #1600, Honolulu, HI 96813



Thus, the adoption of this language into law would provide some necessary protection and clarification on the state's position, and some further support for dispensaries to be able to transport medical cannabis under these limited circumstances.

(7) REMEDICATION OF BATCHES FOR FINAL PRODUCT TO PASS LABS

SECTION 11 addresses what we believe is a need for policy clarification on the process of laboratory testing and what is supposed to happen when a batch fails to meet the stringent standards. We understand that certain DOH officials have taken the position that such a batch, and its represented crop, needs to be destroyed. But, we also are aware of instances where a batch failed and the product was allowed to be remediated and then re-tested so that a final product passes the laboratory testing. We believe that this latter approach is consistent with every other state and jurisdiction in their handling of such a situation.

Should a batch fail for microbial testing, such batches and the crop they represent can be remediated by processing the cannabis so that it would then meet such standards as a final product. For instance, if a batch of flower is found to have too much moisture and fails a test, it can be processed into a medical cannabis product like oil or ointment that would then be tested again, and most likely meet and pass the laboratory standards.

We believe that this is a more reasonable approach to the testing since there is a high investment made in each crop represented by a batch. The purpose of the laboratory standards is to ensure that any final product sold and taken by a qualified patient is safe. This clarified laboratory testing process would meet this purpose and still allow the licensed dispensary to realize the full investment it has made in any crop.

Subpart A—General

§91.19 Carriage of narcotic drugs, marihuana, and depressant or stimulant drugs or substances.

(a) Except as provided in paragraph (b) of this SECTION, no person may operate a civil aircraft within the United States with knowledge that narcotic drugs, marihuana, and depressant or stimulant drugs or substances as defined in Federal or State statutes are carried in the aircraft.

(b) Paragraph (a) of this SECTION does not apply to any carriage of narcotic drugs, marihuana, and depressant or stimulant drugs or substances authorized by or under any Federal or State statute or by any Federal or State agency.



(8) EDIBLES AND CBD

The current marketplace is quite changed since this law was passed less than 4 years ago. A plethora of retail shops that now sell cannabidiol (CBD), and the recent Agriculture Improvement Act of 2018, P.L. 115-334, or the federal Farm Act, no longer considers CBD as an illegal substance.

With these changes, a person can walk into any of these many places (health food stores, grocery and drug stores, convenience stores, or even stores that specialize in CBD products) and purchase any CBD product with no regulations or requirements. These products have no laboratory testing, no labeling requirement, no assurances of accurate potency, and moreover, could easily exceed the lawful tetrahydrocannabinol (THC) limit of 0.3%.

Thus, SECTION 12 of the bill proposes to add CBD products as another item that can be sold at retail locations. This puts the dispensaries on equal footing with any other retail facility. But more importantly, qualified patients are requesting CBD products to supplement their medical cannabis and medical cannabis products that contain lawful THC from the dispensary.

SECTION 12 also allows dispensaries to sell edible products, but under regulation by the DOH. There are several states that have vigorous and stringent standards for edible products that the DOH could look to for guidance like Colorado. These include mandatory symbols, labeling warnings, and prohibitions on use of words or images that could be considered as child-appealing.

<https://www.colorado.gov/pacific/enforcement/med-rules>

SECTION 12 of the bill does not lay out these provisions, but instead allows the DOH to regulate this area and determine how, what, and when such edible products would be available.

Thank you for your consideration.

HB-673

Submitted on: 2/4/2019 2:17:24 PM

Testimony for HLT on 2/5/2019 9:45:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Bonnie Marsh	Hawaii Society of Naturopathic Physicians	Support	No

Comments:

To: House Committee on Health

From: Bonnie Marsh, ND

Hawaii Society of Naturopathic Physicians

Re: HB673, Relating to Medical Cannabis

February 5, 2019 at 9:45 am, Conference Room 329

Position: STRONG SUPPORT

- I am a naturopathic physician practicing in Hawaii for the past 13 years in Haiku, Maui.
- 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 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, Washington 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,

Bonnie Marsh, ND



Steelsmith Natural Health Center

438 Hobron Lane, Suite 314, Honolulu, Hawaii 96815

www.SteelsmithHealth.com

(808)943-0330

To: Chair John M. Mizuno
Vice Chair Bertrand Kobayashi
Members of the Committee on Health

From: Kristen Coles, ND, LAc
Steelsmith Natural Health Center

Re: HB673, Relating to Medical Cannabis
February 5, 2019 at 9:45 am, Conference Room 329

Dear Honorable Representative John Mizuno, Representative Bertrand Kobayashi and all other members of the Committee on Health,

My name is Dr. Kristen Coles and I am a naturopathic physician practicing in Honolulu. I currently serve on the Board of Naturopathic Medicine but this testimony represents my individual opinion on this bill. I strongly support the passage of HB673, Relating to Medical Cannabis. Naturopathic physicians are licensed as primary care providers in the state of Hawaii and thousands of people in Hawaii utilize naturopathic physicians as their primary physician. HB673 would allow these patients greater access to medical use of cannabis if indicated for the medical conditions approved for use. Currently, APRNs are authorized to provide certification for the use of medical cannabis. Naturopathic physicians have significantly more training than APRNs and significantly more training than physician assistants who are also listed in this bill to have authorization. It is important to note that naturopathic physicians are authorized to prescribe medical cannabis in other states, such as Arizona, and Vermont.

Thank you for your consideration of this bill.

Sincerely,

Kristen Coles, ND, LAc

Testimony of the Hawaii Medical Board

**Before the
House Committee on Health
Tuesday, February 5, 2019
9:45 a.m.
State Capitol, Conference Room 329**

**On the following measure:
H.B. 673, RELATING TO MEDICAL CANNABIS**

Chair Mizuno and Members of the Committee:

My name is Ahlani K. Quiogue, and I am the Executive Officer of the Hawaii Medical Board (Board). The Board has not had an opportunity to review and discuss this bill but will do so at its publicly noticed meeting on February 14, 2019.

The purposes of this bill are to: (1) allow naturopathic physicians and physician assistants to provide written certification for qualifying patients; (2) allow licensed dispensaries to have up to two additional manufacturing or processing facilities separate from their production facilities; (3) provide a process for the voluntary or involuntary sale or transfer of an individual dispensary license; (4) allow retail 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 department approval, in the event of a crop failure; (6) allow remediation of any cannabis batch that fails laboratory testing standards as long as any final product passes such standards; and (7) allow licensed retail dispensaries to sell edible cannabis and cannabidiol products.

Thank you for the opportunity to testify on this bill.

Testimony of the Hawaii Medical Board

**Before the
House Committee on Health
Tuesday, February 5, 2019
9:45 a.m.
State Capitol, Conference Room 329**

**On the following measure:
H.B. 673, RELATING TO MEDICAL CANNABIS**

Chair Mizuno and Members of the Committee:

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Thank you for the opportunity to testify on this bill.



Steelsmith Natural Health Center

438 Hobron Lane, Suite 314, Honolulu, Hawaii 96815

www.SteelsmithHealth.com

(808)943-0330

To: Chair John M. Mizuno
Vice Chair Bertrand Kobayashi
Members of the Committee on Health

From: Laurie Steelsmith, ND, LAc
Steelsmith Natural Health Center

Re: HB673, Relating to Medical Cannabis
February 5, 2019 at 9:45 am, Conference Room 329

Dear Honorable Representative John Mizuno, Representative Bertrand Kobayashi and all other members of the Committee on Health,

I am a licensed naturopathic physician practicing in Honolulu since 1993. Please support the passage of HB673, Relating to Medical Cannabis. Naturopathic physicians are licensed as primary care providers in the state of Hawaii. Over the past 25 years I have treated thousands of people with natural medicine providing care as their primary physician. HB673 would allow these patients greater access to medical use of cannabis if indicated for the medical conditions approved for use. Currently, APRNs are authorized to provide certification for the use of medical cannabis. Naturopathic physicians have significantly more training than APRNs and significantly more training than physician assistants who are also listed in this bill to have authorization. It is important to note that naturopathic physicians are authorized to prescribe medical cannabis in other states, such as Arizona, and Vermont.

Thank you for your consideration of this bill.

Sincerely,

Laurie Steelsmith, ND, LAc

HB-673

Submitted on: 2/3/2019 11:47:29 PM

Testimony for HLT on 2/5/2019 9:45:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Carl Bergquist	Drug Policy Forum of Hawaii	Support	No

Comments:

To: Chair John M. Mizuno
Vice Chair Bertrand Kobayashi
Members of the Committee on Health

From: Terisa Jackson, ND
1445 S. Kihei Rd
Kihei, HI 96753

Re: HB637, Relating to Medical Cannabis
February 5, 2019 at 9:45 am, Conference Room 329

Position: STRONG SUPPORT

- I am a naturopathic physician practicing in Hawaii for the past 6 years, and strongly support HB637
- 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 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 prescribed medical cannabis in other states, such as Oregon, Washington, 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,

Terisa M. Jackson, ND

ON THE FOLLOWING MEASURE:
HB673, RELATING TO MEDICAL CANNABIS

BEFORE THE:
COMMITTEE ON HEALTH
DATE: Tuesday, February 5, 2019 TIME: 9:45AM
LOCATION: Conference Room 329

TESTIFIER: Brian Goldstein, Founder & CEO, Noa Botanicals

POSITION: STRONG SUPPORT WITH COMMENTS

Chair Mizuno, Vice Chair Kobayashi and Members of the Committee:

Noa Botanicals is a licensed medical marijuana dispensary in the City and County of Honolulu.

This bill has several important measures that Noa strongly supports

- Allow licensed dispensaries to have manufacturing or processing facilities separate from production facilities, which do not count towards the two Product Center limit
- Allow dispensaries to operate on state and federal holidays
- Allow dispensaries to purchase cannabis or manufactured cannabis products from another licensed dispensary in the event of a crop failure
- Clarifies the rules around testing of final products
- Allows licensed dispensaries to sell hemp-derived CBD products
- Allows for the possession and use of medical cannabis in private rooms or residences located in a state-licensed assisted living facility

Noa Botanicals also requests that certain changes be made to this bill.

Specifically,

- Limit the background check requirement to employees or contractors that work with cannabis or are allowed to touch the cannabis or manufactured cannabis products.
1. The processing or manufacturing of medical cannabis can, at times, require highly specialized equipment, which can be very costly. Given each island's small market size, it is oftentimes uneconomical to purchase highly specialized equipment for the small production runs that a single dispensary may require. Licensed dispensaries would like the ability to contract to third-parties certain processing or manufacturing operations. Doing so will increase patient access, decrease patient costs and increase the types of products available to patients. This will also create jobs and opportunities for related businesses.

- a. It is important to note that these processing or manufacturing facilities may be existing companies who would be subcontracted by the Licensee to do certain processing or manufacturing activities. As a result, certain exceptions will need to be made from current HAR 11-850 and 329D HRS, such as;
 - i. Requirement that the processing or manufacturing facility have a fence
 - ii. Requirement that all employees of the subcontracted processor be background checked. Only those employees of the subcontracted processor who come in contact with the cannabis, or are in the same room as when the cannabis is being processed, should be subject to background check.
 - iii. Video surveillance requirements should be limited to only those rooms and doorways in which cannabis is handled or transported
2. The requirement that dispensaries be closed on state and federal holidays creates a hardship for many patients, limits patient access and increases costs.
3. Growing cannabis indoors without the use of any pesticides is a complex and challenging process. Running a licensed dispensary is very expensive with high fixed operating costs. A catastrophic crop failure would likely cause the dispensary to go out of business due to the extended period of time it would take to recover from the failure. This emergency backup process is a prudent measure that will mitigate the risk of significantly reducing patient access to medicine.
4. Currently, there is a lack of clarity in 11-850 HAR regarding the remediation of product and the requirements regarding testing products. This language will clarify the rules and ensure continued patient access to lab tested, quality products.
5. Currently, there is a lack of clarity as to whether state licensed dispensaries can sell third-party, hemp-derived CBD products. Given the recent change in Federal law and de-scheduling of hemp-derived CBD products, state licensed dispensaries are the natural place that patients will go to learn about, and shop for, these products. This change allows state licensed dispensaries to sell any hemp-derived CBD products and increases patient access to these products.
6. Current DOH position is that “Medical marijuana cannot be used in a state licensed facility or care home” and that “Other place open to the public” in

329-122(c)(2) to include any state licensed health care facility or home.¹ This interpretation puts medical cannabis out of reach for the thousands of elderly Hawaii residents that live in state licensed assisted care facilities and homes. It is critical that this be clarified by allowing our senior citizens living in assisted care facilities or homes access to this important and vital medicine.

7. Hawaii's background check requirements are burdensome, costly and unnecessary. No other state in the country requires every person entering a dispensary facility to pass a background check. Current law and rule require, say an HVAC technician who may be needed to fix the AC system in an office to be fingerprinted and background checked. Even if this person never enters a room in which cannabis is located! This requirement requires that each dispensary have hundreds of people fingerprinted and background checked; plumbers, electricians, HVAC repair, etc. This requirement simply increases operating costs, increases patient costs and does nothing to reduce risk of diversion. A much simpler process would be to require that the only people that must be background checked are "*registered employees of the dispensary licensee, registered employees of a subcontracted production center or retail dispensing location, employees of a certified laboratory for testing purposes*" who are allowed to touch or handle cannabis or manufactured cannabis products §329D-6(g). We suggest the following changes;

§329D-15 (4) Previously included on a current ~~department-approved~~ list provided to the department by the licensee of those persons who are allowed into that dispensary's facilities for a specific purpose for that dispensary, including but not limited to construction, maintenance, repairs, legal counsel, providers of paratransit or other assistive services required by a qualifying patient to access a retail dispensary location, or investors; provided that:

- (A) ~~The person has been individually approved by the department to be included on the list;~~
- (B) The person is at least twenty-one years of age, as verified by a valid government issued identification card;
- (C) ~~The department has confirmed that the person has no felony convictions;~~
- (D) The person is escorted by an individual licensee or registered employee of the dispensary at all times while in the dispensary facility;
- (E) The person is only permitted within those portions of the dispensary facility as necessary to fulfill the person's purpose for entering;
- (F) The person is only permitted within the dispensary facility during the times and for the duration necessary to fulfill the person's purpose for entering;

¹ Email from Keith Ridley, Chief of Office of Health Care Assurance, June 6, 2017

- (G) The dispensary shall keep an accurate record of each person's first and last name, date and times upon entering and exiting the dispensary facility, purpose for entering, and the identity of the escort; and
- (H) The approved list shall be effective for one year ~~from the date of the department approval.~~

And

§329D-16 (3) Previously included on a current ~~department-approved~~ list provided to the department by the licensee of those persons who are allowed into that dispensary's facilities for a specific purpose for that dispensary, including but not limited to construction, maintenance, repairs, legal counsel, or investors; provided that:

- (A) ~~The person has been individually approved by the department to be included on the list;~~
- (B) The person is at least twenty-one years of age, as verified by a valid government issued identification card;
- (C) ~~The department has confirmed that the person has no felony convictions;~~
- (D) The person is escorted by an individual licensee or registered employee of the dispensary at all times while in the dispensary facility;
- (E) The person is only permitted within those portions of the dispensary facility as necessary to fulfill the person's purpose for entering;
- (F) The person is only permitted within the dispensary facility during the times and for the duration necessary to fulfill the person's purpose for entering;
- (G) The dispensary shall keep an accurate record of each person's identity, date and times upon entering and exiting the dispensary facility, purpose for entering, and the identity of the escort; and
- (H) The approved list shall be effective for one year ~~from the date of department approval.~~

Thank you.



February 4, 2019

To: Representative John Mizuno, Chair
Representative Bertrand Kobayashi, Vice-Chair
Members of the House Health Committee

Fr: Gregory Yim, M.D., Chief Medical Officer, Maui Grown Therapies

Re: Testimony **in Support of House Bill (HB) 673**
RELATING TO MEDICAL CANNABIS

Dear Chairs Mizuno, Vice-Chair Kobayashi, and Members of the Committee:

Maui Grown Therapies strongly supports many of the provisions in HB 673 because of their potential to improve quality of life for our patients:

SECTIONS 9 & 10: CROP FAILURE SAFEGUARD FOR PATIENT ACCESS AND INTRASTATE TRANSPORT

The bill allows a licensed dispensary to purchase medical cannabis or manufactured cannabis products from another state-licensed dispensary in the event of a DOH-determined crop failure and includes a provision to authorize intrastate transport for this purpose. This is of special concern for Kaua'i with one licensed dispensary and Hawaii Island where a dispensary may be remotely located. This law would ensure uninterrupted access for registered patients and every step would be regulated by the DOH.

We also request a statutory change that allows for inter-island transport required to accommodate the unique geography of the nation's only island state. Current statute requires any licensee with a certified testing lab on its island to patronize that lab, thereby establishing a monopoly and limiting the number of customers that lab can serve. The resulting higher costs must be passed on to patients.

1972 Federal Aviation Administration (FAA) regulations¹ specifically state that the ban on operating civil aircraft with illegal substances on board, "*does not apply to . . . marihuana, . . . authorized by or under any Federal or State statute or by any Federal or State agency.*" Passing this statute will ensure patient access and help to control compliance costs that must be passed on to the patients.

¹ Federal Regulations, Title 14: Aeronautics and Space
PART 91—GENERAL OPERATING AND FLIGHT RULES
Subpart A—General

§91.19 Carriage of narcotic drugs, marihuana, and depressant or stimulant drugs or substances.
(a) Except as provided in paragraph (b) of this SECTION, no person may operate a civil aircraft within the United States with knowledge that narcotic drugs, marihuana, and depressant or stimulant drugs or substances as defined in Federal or State statutes are carried in the aircraft.

SECTION 10: STATE AND FEDERAL HOLIDAYS

This provision would allow dispensary licensees to determine which, if any, of the state and/or federal holidays warrant closure of their retail dispensary sites. Maui Grown Therapies' patients have expressed their frustration after driving to the dispensary on a lesser-known state holiday such as Kuhio Day or Statehood Day only to find the doors locked. The impending launch of the Out-of-State Patient program means a new group of patients, with little or no knowledge of state holidays, will seek out open dispensaries every day of the week. It is our view that licensees are best suited to determine their own holiday closure policy based upon the needs of their patients.

SECTION 11: REMEDIATION OF BATCHES FOR FINAL PRODUCT TO PASS LABS

This provision addresses a need for policy clarification on the process of laboratory testing when a batch fails to meet standards for microbial contamination. Any agricultural product intended for consumption carries with it an epidemiological risk. Microbial limits testing is an attempt to mitigate some of that risk to protect consumers.

It is important to understand however, that virtually every other state with a medical cannabis program allows for remediation of herbal cannabis that does not pass lab tests for microbial contamination. Similar to how pasteurization eliminates pathogens from milk, the extraction process for herbal cannabis destroys microbes.

The resulting cannabis extract is re-tested to ensure that the final product passes all required lab tests. Hawai'i's stringent laboratory standards ensure that every single product available in a state-licensed dispensary has been certified by a third party lab to be safe. This clarified process is a very important patient issue because it is directly tied to the availability and selection of cannabis and manufactured cannabis formulations available in a state dispensary.

SECTION 12: CANNABIDIOL (CBD) & EDIBLE CANNABINOID-INFUSED PRODUCTS

CBD Products

The recent passage of the Federal Hemp Farming Act of 2018 removed low-THC cannabis (hemp) from the list of prohibited Schedule 1 substances, effectively ending the ambiguity about hemp's legal status under the Controlled Substances Act. All products made from industrial hemp, including CBD oil, are legal if they contain no more than 0.3 percent THC.

In the absence of state regulation, CBD products are openly sold in Hawai'i convenience stores, vape shops, health food stores and even at swap meets. Hemp-derived CBD products are unregulated so they are sold without lab testing requirements for THC content, pesticides, heavy metals or other contaminants, or even cannabinoid content. Likewise there are no restrictions on the types of products that may be sold. Hawai'i retailers are currently selling "hemp flower" by the gram, pre-rolled "CBD" joints, oils, tinctures, pre-filled vape-pens, paraphernalia, and a wide range of cannabinoid-infused foods like gummie bears, with no oversight by the DOH or any other state agency.

Despite a popular perception that CBD is a benign compound, recent research² concluded that high doses of vaporized CBD can lead to intoxication described as a “dissociative state.” The research also found that low doses of CBD, when added to THC, potentiated intoxication relative to THC alone, particularly in infrequent cannabis users, while high doses of CBD when added to THC reduced the intoxication.

SECTION 12 proposes to add CBD products as an approved product available in any state-licensed dispensary. If passed, registered patients who want to use over-the-counter CBD products may purchase products that have been vetted by qualified dispensary personnel. Patients also benefit from education by trained dispensary staff on how best to use these products alone, or in combination with, products containing THC.

Edible Products

This provision also allows dispensaries to sell cannabinoid-infused edible products, but under regulations of the DOH. Most of Maui Grown Therapies patients are over the age of 50 and a majority of them have requested edible products in the dispensary. Many of them have tried an edible product while visiting another state and prefer the “less intense, but longer-lasting” effects³ of a properly-dosed edible.

Smoking or vaporization are not options for patients who use supplementary oxygen. Edible products are also discreet. Patients may eat a square of chocolate or a small cookie and enjoy the therapeutic benefits of cannabis without the telltale odor of cannabis combustion. Hawai‘i has some of the strictest anti-smoking laws in the nation. Colorado reports⁴ that edible cannabis products account for nearly 25 percent of sales to visitors. For our new Out-of-State patients, edibles will offer a smokeless form of administration that will not violate the state’s numerous smoke-free statutes or interfere with the rights of others in public spaces.

States, like Colorado, with the most experience in regulating edible cannabis products have established stringent standards for the products. Their regulations mitigate risks of accidental overdose by adults and accidental ingestion by children. These measures include child-proof packaging, limits on THC content per serving, mandatory universal THC symbols, labeled warnings, mandatory education, and prohibitions on products, words or images that could be considered as child-appealing.

<https://www.colorado.gov/pacific/enforcement/med-rules>

This bill provision does not articulate these regulations, but instead allows the DOH to regulate the manufacture and sale of edible products in state-licensed dispensaries.

Mahalo for your time and consideration.

² Solowij, N., Broyd, S., Greenwood, L. et al. (2019) *European Archives for Psychiatry & Clinical Neuroscience* <https://doi.org/10.1007/s00406-019-00978-2>

³ Russo, EB & Marcu, JP (2017) Cannabis Pharmacology: The Usual Suspects and a Few Promising Leads. *Advances in pharmacology*, 80, 67-134

⁴ *Market Size and Demand for Marijuana in Colorado 2017-Market Update*, Prepared for the Colorado Department of Revenue, by the Marijuana Policy Group and Leeds School of Business, University of Colorado, Boulder; August 2018

HB-673

Submitted on: 2/3/2019 10:28:15 AM

Testimony for HLT on 2/5/2019 9:45:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Joseph Clinton Comstock Jr.	Individual	Support	No

Comments:

Given the recognized shortage of health care providers in Hawaii, passage of this bill would improve the adequacy of patient access to medical cannabis.

Thank you for this opportunity.

Joseph C. Comstock, Jr.

HB-673

Submitted on: 2/3/2019 1:59:53 PM

Testimony for HLT on 2/5/2019 9:45:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Maxwell Crispo	Individual	Support	No

Comments:

To: Chair John M. Mizuno

Vice Chair Bertrand Kobayashi

Members of the Committee on Health

From: Maxwell Crispo, ND

Naturopathic Physician in Kailua-Kona, Hawaii

Re: HB637, Relating to Medical Cannabis

February 5, 2019 at 9:45 am, Conference Room 329

Position: STRONG SUPPORT

My name is Maxwell Crispo; I am a naturopathic physician, with clinical practice on the Big Island of Hawaii.

While the great state of Hawaii is continuing to make leads in healthcare innovation, many of our citizens are still struggling with poor access to healthcare. This is especially true for patients in need of medical cannabis. Many of the patients I see in my practice qualify for medical cannabis use. There is well-established evidence-based medicine research to demonstrate medical cannabis would provide these qualifying patients with significant relief, that would in turn, decrease their significant current burden on the healthcare system here. Because I cannot currently authorize these patients myself, this requires me having to refer patients out to an unfamiliar source for them to attempt to

access this treatment. This process is inefficient, costs multiple parties (including the state) unnecessary expense and does not serve the patients' best interests.

Naturopathic physicians have the education and understanding of the appropriate and responsible prescribing of medical cannabis to offer a resource to the citizens and healthcare systems of Hawaii by becoming authorized by law to certify patients for medical cannabis use.

Naturopathic physicians are authorized to prescribe medical cannabis in a number of other states and jurisdictions already, including Vermont, Arizona and Washington.

Naturopathic physicians have significantly more medical training than APRNs (who are currently authorized to certify medical cannabis in Hawaii), as well as physician assistants (who with the passing of this bill would also qualify for authorization).

Naturopathic physicians are the only qualified regulated primary care providers (PCP) in the state of Hawaii with any formal academic or clinical training in botanical and herbal medicine, including medical cannabis. Thousands of citizens in Hawaii see solely a naturopathic physician as their PCP.

Lastly, 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,

Dr. Maxwell Crispo, ND

HB-673

Submitted on: 2/3/2019 2:20:37 PM

Testimony for HLT on 2/5/2019 9:45:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Anne Dye	Individual	Support	No

Comments:

Aloha Hawaii Government,

I am writing you in STONG SUPPORT of HB673, which would allow Naturopathic Physicians to provide certification for medical cannabis use. 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.

Thousands of people in Hawaii have a Naturopathic physician as their primary care provider. 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. 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 physician assistants, who, with passage of this bill, would also be authorized to provide the necessary certification for medical cannabis use. Naturopathic physicians also have significantly more training than APRNs, who already are authorized to provide certification for the use of medical cannabis.

Naturopathic physicians are authorized to prescribed medical cannabis in other states, such as Oregon, Washington, Arizona and Vermont. It is time for Hawaii to become one of these states.

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,

Dr. Anne Dericks, ND

Naturopathic Physician

HB-673

Submitted on: 2/3/2019 11:28:22 AM

Testimony for HLT on 2/5/2019 9:45:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Katherine Pomeroy	Individual	Support	No

Comments:

To: Chair John M. Mizuno Vice Chair Bertrand Kobayashi Members of the Committee on Health

From: Katherine Pomeroy, ND

Re: HB637, Relating to Medical Cannabis February 5, 2019 at 9:45 am, Conference Room 329

Position: STRONG SUPPORT

- I am a naturopathic physician practicing in North Hawaii since 1988.
- 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 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 prescribed medical cannabis in other states, such as Oregon, Washington, 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,

Katherine Pomeroy, ND

HB-673

Submitted on: 2/3/2019 10:17:56 AM

Testimony for HLT on 2/5/2019 9:45:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Colehour Bondera	Individual	Support	No

Comments:

Aloha Chair and Committee Members:

Thank you for your attention to this important piece of legislation. As a long-term resident and farmer in Hawaii, it has become clear to me and my family (with two children who grew up here) that we must be flexible and open to options regarding health care needs as they arise.

Changes have been common-place for us in terms of health insurance coming in a range of ways from a range of sources.

That means that if we are seeking something to help a condition, that we do not want to have to seek a separate specialist simply because the one we are seeing cannot deal with issues at hand. For this reason my request is that you pass this piece of legislation in order to make the lives of your residents smoother and simpler and not requiring certain types of practitioners for certain needs.

Naturopathic doctors are capable and willing to serve the community -- that is what they are in place for, and they have equivalent (though different) training as Medical doctors. Please recognize this and recognize that perscriptions for cannibus are not significant enough to warrant a different kind of medical professional.

Thank you for your consideraton and your support for this important piece of legislation.

Sincerely,

Colehour Bondera

Honaunau, HI

HB-673

Submitted on: 2/3/2019 3:26:36 PM

Testimony for HLT on 2/5/2019 9:45:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Swami Om	Individual	Support	No

Comments:

I am 67 yrs. old. I have sucessfully run my own massage bussiness for 31 yrs. I have had my medical cannibis license for at least 11 yrs. It helps me with the nausea and headaches. I am a patient of Dr. Margaret Dexter-Waldbauer (naturopathic) since she came to Hawaii. I have complete confidence in her and it would be more convient for me to visit her when it comes time to renew.

HB-673

Submitted on: 2/1/2019 4:21:02 PM

Testimony for HLT on 2/5/2019 9:45:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Victor K. Ramos	Individual	Oppose	No

Comments:

Licensed Doctors only.

HB-673

Submitted on: 2/3/2019 4:37:07 PM

Testimony for HLT on 2/5/2019 9:45:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Marti Townsend	Individual	Support	No

Comments:

RELATING TO MEDICAL CANNABIS

NOTICE OF HEARING

DATE: Tuesday, February 5, 2019
TIME: 9:45 a.m.
PLACE: Conference Room 329
State Capitol

RE: HB 673

HB 673 proposed amendments state:

The purpose of this Act is to:

- (1) Allow naturopathic physicians and physician assistants practicing under supervision to provide written certification for qualifying patients to improve patient access to medical cannabis;

There are many instances where the term physician assistant is not included in the language, where it should be. Example:

2. 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,...

This and similar sections need to also include physician assistant as follows:

There are multiple omissions which are corrected by these proposed amendments.

""Written certification" means the qualifying patient's medical records or a statement signed by a qualifying patient's physician, naturopathic physician, physician assistant, or advanced practice registered nurse, stating that in the physician's, physician assistant's, naturopathic physician's, or advanced practice registered nurse's professional opinion,...

The attached additional proposed amendments add physician assistant language as needed for consistency throughout the bill. They further clarify that physician assistants (PAs) are licensed to practice medicine as per HRS 453.

The purpose of this Act is to:

- (1) Allow naturopathic physicians and physician assistants ~~practicing under supervision~~ , licensed to practice medicine under HRS 453, to provide written certification for qualifying patients to improve patient access to medical cannabis;

Physician assistants (PAs) are designated as primary care providers by HMSA, Medicare, and other insurance providers and work in rural areas where there are documented provider shortages. PAs should be included amongst providers authorized to provide written certification for medical cannabis.

The proposed amendments, as attached, will provide continuity and eliminate ambiguity. Please include these amendments as you move this bill forward.

Fielding Mercer, PA-C

Previous president and legislative liaison, Hawaii Academy of Physician Assistants

A BILL FOR AN ACT

RELATING TO MEDICAL CANNABIS.

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

1 SECTION 1. The legislature finds that Act 241, Session
2 Laws of Hawaii 2015, codified as chapter 329D, Hawaii Revised
3 Statutes, established a licensing framework for a statewide
4 system of medical cannabis dispensaries to ensure access to
5 medical cannabis for qualifying patients. Act 230, Session Laws
6 of Hawaii 2016, Act 41, Session Laws of Hawaii 2017, and Act
7 116, Session Laws of Hawaii 2018, made further amendments.

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

13 The purpose of this Act is to:

14 (1) Allow naturopathic physicians and physician assistants
15 ~~practicing under supervision~~ ,licensed to practice
16 medicine under HRS 453, to provide written

1 certification for qualifying patients to improve
2 patient access to medical cannabis;

3 (2) Allow licensed dispensaries to have manufacturing or
4 processing facilities separate from their production
5 facilities, while remaining subject to all regulations
6 under the law;

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

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

11 (5) Allow a licensed dispensary to purchase medical
12 cannabis or manufactured cannabis products from
13 another licensed dispensary, with approval from the
14 department of health, to ensure patient access to
15 cannabis in the event of a crop failure;

16 (6) Allow remediation of any cannabis batch that fails
17 laboratory testing standards as long as any final
18 product passes such standards; and

19 (7) Allow licensed retail dispensaries to sell edible
20 cannabis and cannabidiol products.

21 SECTION 2. Chapter 329D, Hawaii Revised Statutes, is
22 amended by adding a new section to be appropriately designated
23 and to read as follows:

1 "§329D- Sale or transfer of dispensary license. (a) In

2 the event of death, legal incapacity, or permanent disability of
3 an individual dispensary licensee, the relevant entity licensee
4 shall notify the department within thirty days of the individual
5 licensee's inability to continue in the individual's capacity as
6 a licensee, and shall provide to the department within another
7 thirty days, a plan for the sale or transfer of the individual
8 license to another individual who shall meet all the
9 requirements under this chapter.

10 (b) In the event of a voluntary resignation by an
11 individual licensee, termination of an individual licensee's
12 employment with an entity licensee with or without cause, or any
13 other permanent separation of the relationship between an
14 individual licensee and an entity licensee, the relevant entity
15 licensee shall submit a plan to the department for approval at
16 least thirty days prior to any sale or transfer of the
17 individual license to another individual who shall meet all the
18 requirements under this chapter."

19 SECTION 3. Section 329-121, Hawaii Revised Statutes, is
20 amended as follows:

21 1. By amending the definition of "physician" to read:
22 ""Physician" means a person who is licensed to practice
23 under chapter 453 and is licensed with authority to prescribe
24 drugs and is registered under section 329-32. "Physician" [~~does~~

1 ~~not~~ shall include a physician assistant as described in section
2 453-5.3."

3 2. By amending the definition of "written certification"
4 to read:

5 "Written certification" means the qualifying patient's
6 medical records or a statement signed by a qualifying patient's
7 physician, physician assistant, naturopathic physician, or
8 advanced practice registered nurse, stating that in the
9 physician's, physician assistants, naturopathic physician's, or
10 advanced practice registered nurse's professional opinion, the
11 qualifying patient has a debilitating medical condition and the
12 potential benefits of the medical use of cannabis would likely
13 outweigh the health risks for the qualifying patient. The
14 department of health may require, through its rulemaking
15 authority, that all written certifications comply with a
16 designated form. "Written certifications" are valid for one
17 year from the time of signing; provided that the department of
18 health may allow for the validity of any written certification
19 for up to three years if the qualifying patient's physician,
20 physician assistant, naturopathic physician, or advanced
21 practice registered nurse states that the patient's debilitating
22 medical condition is chronic in nature."

23 3. By adding a new definition to be appropriately
24 inserted and to read:

1 "Naturopathic physician" means a person who holds a
2 current license issued under chapter 455 to practice
3 naturopathic medicine, is licensed with authority to prescribe
4 drugs, and is registered under section 329-32."

5 SECTION 4. Section 329-122, Hawaii Revised Statutes, is
6 amended as follows:

7 1. By amending subsection (a) to read:

8 "(a) Notwithstanding any law to the contrary, the medical
9 use of cannabis by a qualifying patient shall be permitted only
10 if:

- 11 (1) The qualifying patient has been diagnosed by a
12 physician, physician assistant, naturopathic
13 physician, or advanced practice registered nurse as
14 having a debilitating medical condition;
- 15 (2) The qualifying patient's physician, physician
16 assistant, naturopathic physician, or advanced
17 practice registered nurse has certified in writing
18 that, in the physician's, physician assistant's,
19 naturopathic physician's, or advanced practice
20 registered nurse's professional opinion, the potential
21 benefits of the medical use of cannabis would likely
22 outweigh the health risks for the particular
23 qualifying patient; and

1 (3) The amount of cannabis possessed by the qualifying
2 patient does not exceed an adequate supply."

3 2. By amending subsection (e) to read:

4 "(e) The authorization for the medical use of cannabis in
5 this section shall not apply to:

6 (1) The medical use of cannabis that endangers the health
7 or well-being of another person;

8 (2) The medical use of cannabis:

9 (A) In a school bus, public bus, or any moving
10 vehicle;

11 (B) In the workplace of one's employment;

12 (C) On any school grounds;

13 (D) At any public park, public beach, public
14 recreation center, recreation or youth center; or

15 (E) At any other place open to the public; provided
16 that [a]:

17 (i) A qualifying patient shall not be prohibited
18 from use of cannabis in private rooms or
19 residences located in a state-licensed
20 assisted living facility; and

21 (ii) A qualifying patient, primary caregiver,
22 qualifying out-of-state patient, caregiver
23 of a qualifying out-of-state patient, or an
24 owner or employee of a medical cannabis

1 dispensary licensed under chapter 329D shall
2 not be prohibited from transporting cannabis
3 or any manufactured cannabis product, as
4 that term is defined in section 329D-1, in
5 any public place; provided further that the
6 cannabis or manufactured cannabis product
7 shall be transported in a sealed container,
8 not be visible to the public, and shall not
9 be removed from its sealed container or
10 consumed or used in any way while it is in
11 the public place; and

12 (3) The use of cannabis by a qualifying patient, parent,
13 primary caregiver, qualifying out-of-state patient, or
14 caregiver of a qualifying out-of-state patient, for
15 purposes other than medical use permitted by this
16 part."

17 SECTION 5. Section 329-123, Hawaii Revised Statutes, is
18 amended by amending subsections (a) and (b) to read as follows:

19 "(a) Physicians, physician assistants, naturopathic
20 physicians, or advanced practice registered nurses who issue
21 written certifications shall provide, in each written
22 certification, the name, address, patient identification number,
23 and other identifying information of the qualifying patient.
24 The department of health shall require, in rules adopted

1 pursuant to chapter 91, that all written certifications comply
2 with a designated form completed by or on behalf of a qualifying
3 patient. The form shall require information from [~~the~~]:

4 (1) The applicant[~~r~~];

5 (2) The primary caregiver[~~r~~]; and

6 (3) The physician, physician assistant, naturopathic
7 physician, or advanced practice registered nurse, as
8 specifically required or permitted by this chapter.

9 The form shall require the address of the location
10 where the cannabis is grown and shall appear on the
11 registry card issued by the department of health. The
12 certifying physician, physician assistant,
13 naturopathic physician, or advanced practice
14 registered nurse shall be required to have a bona fide
15 physician-patient relationship, bona fide physician
16 assistant-patient relationship, bona fide naturopathic
17 physician-patient relationship, or bona fide advanced
18 practice registered nurse-patient relationship, as
19 applicable, with the qualifying patient. All current
20 active medical cannabis permits shall be honored
21 through their expiration date.

22 (b) Qualifying patients shall register with the department
23 of health. The registration shall be effective until the
24 expiration of the certificate issued by the department of health

1 and signed by the physician, physician assistant, naturopathic
2 physician, or advanced practice registered nurse. Every
3 qualifying patient shall provide sufficient identifying
4 information to establish the personal identities of the
5 qualifying patient and the primary caregiver. Qualifying
6 patients shall report changes in information within ten working
7 days. Every qualifying patient shall have only one primary
8 caregiver at any given time. The department of health shall
9 issue to the qualifying patient a registration certificate, and
10 shall charge \$35 per year."

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

14 "**§329-126 Protections afforded to a treating physician,**
15 **physician assistant, naturopathic physician, or advanced**
16 **practice registered nurse.** (a) No physician, physician
17 assistant, naturopathic physician, or advanced practice
18 registered nurse shall be subject to arrest or prosecution,
19 penalized in any manner, or denied any right or privilege for
20 providing written certification for the medical use of cannabis
21 for a qualifying patient; provided that:

22 (1) The physician, physician assistant, naturopathic
23 physician, or advanced practice registered nurse has

1 diagnosed the patient as having a debilitating medical
2 condition, as defined in section 329-121;

3 (2) The physician, physician assistant, naturopathic
4 physician, or advanced practice registered nurse has
5 explained the potential risks and benefits of the
6 medical use of cannabis, as required under section
7 329-122;

8 (3) The written certification is based upon the
9 physician's, physician assistant's, naturopathic
10 physician's, or advanced practice registered nurse's
11 professional opinion after having completed a full
12 assessment of the patient's medical history and
13 current medical condition made in the course of a bona
14 fide physician-patient relationship, bona fide
15 physician assistant-patient relationship, bona fide
16 naturopathic physician-patient relationship, or bona
17 fide advanced practice registered nurse-patient
18 relationship, as applicable; and

19 (4) The physician, physician assistant, naturopathic
20 physician, or advanced practice registered nurse has
21 complied with the registration requirements of section
22 329-123."

23 SECTION 7. Section 329-128, Hawaii Revised Statutes, is
24 amended by amending subsection (b) to read as follows:

1 "(b) Notwithstanding any law to the contrary, fraudulent
2 misrepresentation to a law enforcement official of any fact or
3 circumstance relating to the issuance of a written certificate
4 by a physician, physician assistant, naturopathic physician, or
5 advanced practice registered nurse not covered under section
6 329-126 for the medical use of cannabis shall be a misdemeanor.
7 This penalty shall be in addition to any other penalties that
8 may apply for the non-medical use of cannabis."

9 SECTION 8. Section 329D-2, Hawaii Revised Statutes, is
10 amended by amending subsection (f) to read as follows:

11 "(f) Up to two production centers shall be allowed under
12 each dispensary license; provided that~~[7]~~ up to two separate
13 manufacturing or processing facilities may be authorized which
14 shall meet all requirements of any dispensary facility, but
15 shall not be considered as production centers for the purposes
16 of the two production center limit; provided further that,
17 except as otherwise specified in subsection (k), each production
18 center shall be limited to no more than three thousand cannabis
19 plants. For purposes of this subsection, "plant" means a
20 cannabis plant that is greater than twelve vertical inches in
21 height from where the base of the stalk emerges from the growth
22 medium to the tallest point of the plant, or greater than twelve
23 horizontal inches in width from the end of one branch to the end
24 of another branch; provided that multiple stalks emanating from

1 the same root ball or root system shall be considered part of
2 the same single plant."

3 SECTION 9. Section 329D-3, Hawaii Revised Statutes, is
4 amended by amending subsection (c) to read as follows:

5 "(c) A dispensary license shall not be sold or otherwise
6 transferred from one person to another person[-] without
7 approval from the department as provided in section 329D- ."

8 SECTION 10. Section 329D-6, Hawaii Revised Statutes, is
9 amended to read as follows:

10 "**§329D-6 Dispensary operations.** (a) No person shall
11 operate a dispensary, nor engage in the production, manufacture,
12 or sale of cannabis or manufactured cannabis products, unless
13 the person has obtained a license from the department pursuant
14 to this chapter.

15 (b) No dispensary licensee, its officers, employees, or
16 agents shall provide written certification for the use of
17 medical cannabis or manufactured cannabis products for any
18 person.

19 (c) No person under the age of twenty-one shall be
20 employed by a dispensary licensee.

21 (d) Notwithstanding any other law to the contrary,
22 including but not limited to sections 378-2 and 378-2.5,
23 dispensaries:

24 (1) Shall deny employment to any individual who has been:

- 1 (A) Convicted of murder in any degree;
- 2 (B) Convicted of a class A or class B felony; or
- 3 (C) Convicted of a class C felony involving
- 4 trafficking, distributing, or promoting a
- 5 schedule I or II controlled substance other than
- 6 cannabis within the last ten years; and

7 (2) May deny employment to any individual who has been
8 convicted of a class C felony involving:

9 (A) Fraud, deceit, misrepresentation, embezzlement,
10 or theft; or

11 (B) Endangering the welfare of a minor.

12 Employment under this chapter shall be exempt from section
13 378-2(a)(1), as it relates to arrest and court record
14 discrimination, and section 378-2.5.

15 (e) Retail dispensing locations shall not be open for
16 retail sales before 8:00 a.m. or after 8:00 p.m., Hawaii-
17 Aleutian Standard Time, Monday through Sunday. [~~Retail~~
18 ~~dispensing locations shall be closed on official state and~~
19 ~~federal holidays.~~]

20 (f) All dispensary facilities, including but not limited
21 to production centers and retail dispensing locations, shall be
22 enclosed indoor facilities and shall maintain twenty-four hour
23 security measures, including but not limited to an alarm system,
24 video monitoring and recording on the premises, and exterior

1 lighting. A dispensary licensee who intends to utilize, as a
2 production center, an enclosed indoor facility that includes a
3 roof that is partially or completely transparent or translucent,
4 as provided under section 329D-1, shall notify the department of
5 that intention prior to altering or constructing the facility.
6 Production centers shall remain locked at all times. Retail
7 dispensing locations shall remain locked at all times, other
8 than business hours as authorized by subsection (e), and shall
9 only be opened for authorized persons.

10 (g) In all dispensary facilities, only the licensee, if an
11 individual, registered employees of the dispensary licensee,
12 registered employees of a subcontracted production center or
13 retail dispensing location, employees of a certified laboratory
14 for testing purposes, state employees authorized by the director
15 of health, and law enforcement and other government officials
16 acting in their official capacity shall be permitted to touch or
17 handle any cannabis or manufactured cannabis products, except
18 that a qualifying patient, primary caregiver, qualifying out-of-
19 state patient, or caregiver of a qualifying out-of-state patient
20 may receive manufactured cannabis products at a retail
21 dispensing location following completion of a sale.

22 (h) A dispensary shall provide the department with the
23 address, tax map key number, and a copy of the premises lease,
24 if applicable, of the proposed location of a production center

1 allowed under a license for a county not later than thirty days
2 prior to any medical cannabis or manufactured cannabis products
3 being produced or manufactured at that production center.

4 (i) A dispensary shall provide the department with the
5 address, tax map key number, and a copy of the premises lease,
6 if applicable, of the proposed location of each retail
7 dispensing location allowed under a license not less than sixty
8 days prior to opening for business.

9 (j) The department shall establish, maintain, and control
10 a computer software tracking system that shall have real time,
11 twenty-four-hour access to the data of all dispensaries.

12 (1) The computer software tracking system shall collect
13 data relating to:

14 (A) The total amount of cannabis in possession of all
15 dispensaries from either seed or immature plant
16 state, including all plants that are derived from
17 cuttings or cloning, until the cannabis, cannabis
18 plants, or manufactured cannabis product is sold
19 or destroyed pursuant to section 329D-7;

20 (B) The total amount of manufactured cannabis product
21 inventory, including the equivalent physical
22 weight of cannabis that is used to manufacture
23 manufactured cannabis products, purchased by a
24 qualifying patient, primary caregiver, qualifying

1 out-of-state patient, and caregiver of a
2 qualifying out-of-state patient from all retail
3 dispensing locations in the State in any fifteen-
4 day period;

5 (C) The amount of waste produced by each plant at
6 harvest; and

7 (D) The transport of cannabis and manufactured
8 cannabis products between production centers and
9 retail dispensing locations~~[7]~~ and as permitted
10 by subsection (r), including tracking
11 identification issued by the tracking system, the
12 identity of the person transporting the cannabis
13 or manufactured cannabis products, and the make,
14 model, and license number of the vehicle being
15 used for the transport;

16 (2) The procurement of the computer software tracking
17 system established pursuant to this subsection shall
18 be exempt from chapter 103D; provided that:

19 (A) The department shall publicly solicit at least
20 three proposals for the computer software
21 tracking system; and

22 (B) The selection of the computer software tracking
23 system shall be approved by the director of the
24 department and the chief information officer; and

1 (3) Notwithstanding any other provision of this subsection
2 to the contrary, once the department has authorized a
3 licensed dispensary to commence sales of cannabis or
4 manufactured cannabis products, if the department's
5 computer software tracking system is inoperable or is
6 not functioning properly, as an alternative to
7 requiring dispensaries to temporarily cease
8 operations, the department may implement an alternate
9 tracking system that will enable a qualifying patient,
10 primary caregiver, qualifying out-of-state patient,
11 and caregiver of a qualifying out-of-state patient to
12 purchase cannabis or manufactured cannabis products
13 from a licensed dispensary on a temporary basis. The
14 department shall seek input regarding the alternate
15 tracking system from medical cannabis licensees. The
16 alternate tracking system may operate as follows:

17 (A) The department may immediately notify all
18 licensed dispensaries that the computer software
19 tracking system is inoperable; and

20 (B) Once the computer software tracking system is
21 operational and functioning to meet the
22 requirements of this subsection, the department
23 may notify all licensed dispensaries, and the

1 alternate tracking system in this subsection
2 shall be discontinued.

3 (k) A dispensary licensed pursuant to this chapter shall
4 purchase, operate, and maintain a computer software tracking
5 system that shall:

6 (1) Interface with the department's computer software
7 tracking system established pursuant to subsection
8 (j);

9 (2) Allow each licensed dispensary's production center to
10 submit to the department in real time, by automatic
11 identification and data capture, all cannabis,
12 cannabis plants, and manufactured cannabis product
13 inventory in possession of that dispensary from either
14 seed or immature plant state, including all plants
15 that are derived from cuttings or cloning, until the
16 cannabis or manufactured cannabis product is sold or
17 destroyed pursuant to section 329D-7;

18 (3) Allow the licensed dispensary's retail dispensing
19 location to submit to the department in real time for
20 the total amount of cannabis and manufactured cannabis
21 product purchased by a qualifying patient, primary
22 caregiver, qualifying out-of-state patient, and
23 caregiver of a qualifying out-of-state patient from
24 the dispensary's retail dispensing locations in the

1 State in any fifteen day period; provided that the
2 software tracking system shall impose an automatic
3 stopper in real time, which cannot be overridden, on
4 any further purchases of cannabis or manufactured
5 cannabis products, if the maximum allowable amount of
6 cannabis has already been purchased for the applicable
7 fifteen day period; provided further that additional
8 purchases shall not be permitted until the next
9 applicable period; and

10 (4) Allow the licensed dispensary to submit all data
11 required by this subsection to the department and
12 permit the department to access the data if the
13 department's computer software tracking system is not
14 functioning properly and sales are made pursuant to
15 the alternate tracking system under subsection (j).

16 (1) No free samples of cannabis or manufactured cannabis
17 products shall be provided at any time, and no consumption of
18 cannabis or manufactured cannabis products shall be permitted on
19 any dispensary premises.

20 (m) [A] Except as permitted pursuant to subsection (r), a
21 dispensary shall not transport cannabis or manufactured cannabis
22 products to another county or another island; provided that this
23 subsection shall not apply to the transportation of cannabis or
24 any manufactured cannabis product solely for the purposes of

1 laboratory testing pursuant to section 329D-8, and subject to
2 subsection (j), if no certified laboratory is located in the
3 county or on the island where the dispensary is located;
4 provided further that a dispensary shall only transport samples
5 of cannabis and manufactured cannabis products for laboratory
6 testing for purposes of this subsection in an amount and manner
7 prescribed by the department, in rules adopted pursuant to this
8 chapter, and with the understanding that state law and its
9 protections do not apply outside of the jurisdictional limits of
10 the State.

11 (n) [A] Except for dispensary-to-dispensary sales as
12 provided in subsection (r), a dispensary shall be prohibited
13 from off-premises delivery of cannabis or manufactured cannabis
14 products to a qualifying patient, primary caregiver, qualifying
15 out-of-state patient, or caregiver of a qualifying out-of-state
16 patient.

17 (o) A dispensary shall not:

18 (1) Display cannabis or manufactured cannabis products in
19 windows or in public view; or

20 (2) Post any signage other than a single sign no greater
21 than one thousand six hundred square inches bearing
22 only the business or trade name in text without any
23 pictures or illustrations; provided that if any
24 applicable law or ordinance restricting outdoor

1 signage is more restrictive, that law or ordinance
2 shall govern.

3 (p) No cannabis or manufactured cannabis products shall be
4 transported to, from, or within any federal fort or arsenal,
5 national park or forest, any other federal enclave, or any other
6 property possessed or occupied by the federal government.

7 (q) A dispensary licensed pursuant to this chapter shall
8 be prohibited from providing written certification pursuant to
9 section 329-122 for the use of medical cannabis for any person.

10 (r) In the event of a crop failure of cannabis plants that
11 could affect patient access, the department may permit a
12 dispensary to purchase medical cannabis and manufactured
13 cannabis products from another dispensary in an amount and
14 manner prescribed by the department by rules adopted pursuant to
15 this chapter and chapter 91; provided that:

16 (1) The purchasing dispensary documents the failure of the
17 cannabis crops and submits the documentation to the
18 department;

19 (2) The selling dispensary is permitted by the department
20 to transport cannabis or manufactured cannabis
21 products to another county or another island, for the
22 limited purpose of completing its sale to the
23 purchasing dispensary pursuant to this subsection, in
24 an amount and manner prescribed by the department by

1 rules adopted pursuant to this chapter and chapter 91
2 and with the understanding that state law and its
3 protections do not apply outside of the jurisdictional
4 limits of the State; and

5 (3) Nothing in this subsection shall relieve any
6 dispensary of its responsibilities and obligations
7 under this chapter and chapter 329."

8 SECTION 11. Section 329D-8, Hawaii Revised Statutes, is
9 amended by amending subsection (a) to read as follows:

10 "(a) The department shall establish and enforce standards
11 for laboratory-based testing of cannabis and manufactured
12 cannabis products for content, contamination, and consistency;
13 provided that in establishing these standards, the department
14 shall:

15 (1) Review and take guidance from the testing programs and
16 standards utilized in other jurisdictions;

17 (2) Consider the impact of the standards on the retail
18 cost of the product to the qualifying patient;

19 (3) Review and take guidance from the testing programs and
20 standards for pesticides under the regulations of the
21 United States Environmental Protection Agency;

22 (4) Consider processes that allow any batch of cannabis or
23 manufactured cannabis products that fails testing
24 standards to be remediated and manufactured as long as

1 any final cannabis or manufactured cannabis product
2 passes testing standards;

3 (5) For the testing for microbiological impurities,
4 consider the benefits of organically grown cannabis
5 that features the use of bacteria in lieu of
6 pesticides; and

7 ~~(5)~~ (6) Include permission for qualifying patients and
8 primary caregivers to obtain testing services directly
9 from certified laboratories on the island where the
10 qualifying patient and primary caregiver reside."

11 SECTION 12. Section 329D-10, Hawaii Revised Statutes, is
12 amended to read as follows:

13 "**§329D-10 Types of manufactured cannabis products.** (a)

14 The types of medical cannabis products that may be manufactured
15 and distributed pursuant to this chapter shall be limited to:

16 (1) Capsules;

17 (2) Lozenges;

18 (3) Pills;

19 (4) Oils and oil extracts;

20 (5) Tinctures;

21 (6) Ointments and skin lotions;

22 (7) Transdermal patches;

23 (8) Pre-filled and sealed containers used to aerosolize

24 and deliver cannabis orally, such as with an inhaler

1 or nebulizer; provided that containers need not be
2 manufactured by the licensed dispensary but shall be
3 filled with cannabis, cannabis oils, or cannabis
4 extracts manufactured by the licensed dispensary;
5 shall not contain nicotine, tobacco-related products,
6 or any other non-cannabis derived products; and shall
7 be designed to be used with devices used to provide
8 safe pulmonary administration of manufactured cannabis
9 products;

10 (9) Devices that provide safe pulmonary administration;
11 provided that:

12 (A) The heating element of the device, if any, is
13 made of inert materials such as glass, ceramic,
14 or stainless steel, and not of plastic or rubber;

15 (B) The device is distributed solely for use with
16 single-use, pre-filled, tamper-resistant, sealed
17 containers that do not contain nicotine or other
18 tobacco products;

19 (C) The device is used to aerosolize and deliver
20 cannabis by inhalation, such as an inhaler,
21 medical-grade nebulizer, or other similar medical
22 grade volitization device;

1 (D) There is a temperature control on the device that
2 is regulated to prevent the combustion of
3 cannabis oil; and

4 (E) The device need not be manufactured by the
5 licensed dispensary; [~~and~~]

6 (10) Edible cannabis products;

7 (11) Cannabidiol products; and

8 (12) Other products as specified by the department.

9 (b) As used in this section[~~,"lozenge"~~]:

10 "Lozenge" means a small tablet manufactured in a manner to
11 allow for the dissolving of its medicinal or therapeutic
12 component slowly in the mouth.

13 "Edible cannabis products" means food products intended for
14 human consumption that are infused with any cannabinoid
15 extracted from the cannabis plant as regulated by administrative
16 rules of the department.

17 "Cannabidiol products" means any products derived from the
18 cannabis sativa which contain cannabidiol, including cannabidiol
19 derived from hemp as defined in the Agriculture Improvement Act
20 of 2018, P.L. 115-334."

21 SECTION 13. This Act does not affect rights and duties
22 that matured, penalties that were incurred, and proceedings that
23 were begun before its effective date.

1 SECTION 14. Statutory material to be repealed is bracketed
2 and stricken. New statutory material is underscored.

3 SECTION 15. This Act shall take effect upon its approval.

4

 INTRODUCED BY: _____

5

Report Title:

Department of Health; Cannabis; Cannabidiol Products;
Naturopathic Physician; License; Dispensary

Description:

Allows naturopathic physicians and physician assistants to provide written certification for qualifying patients. Allows licensed dispensaries to have up to two additional manufacturing or processing facilities separate from their production facilities. Provides a process for the voluntary or involuntary sale or transfer of an individual dispensary license. Allows retail dispensaries to operate on state and federal holidays. Allows a licensed dispensary to purchase medical cannabis or manufactured cannabis products from another licensed dispensary, with department approval, in the event of a crop failure. Allows remediation of any cannabis batch that fails laboratory testing standards as long as any final product passes such standards. Allows licensed retail dispensaries to sell edible cannabis and cannabidiol products.

The summary description of legislation appearing on this page is for informational purposes only and is not legislation or evidence of legislative intent.

HB-673

Submitted on: 2/3/2019 1:41:02 PM

Testimony for HLT on 2/5/2019 9:45:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Jane Rodgers	Individual	Support	No

Comments:

To: Chair John M. Mizuno

Vice Chair Bertrand Kobayashi

Members of the Committee on Health

From: Jane Rodgers

75-5789 Kakalina St Kailua-Kona, HI 96743

Re: HB637, Relating to Medical Cannabis

February 5, 2019 at 9:45 am, Conference Room 329

Position: STRONG SUPPORT

- I am a R.N.

- 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 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 Oregon, Washington, 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,

Jane Rodgers, R.N. and C.P.A.

HB-673

Submitted on: 2/3/2019 5:08:14 PM

Testimony for HLT on 2/5/2019 9:45:00 AM

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

Comments:

Dear Chair John M. Mizuno, Vice Chair Bertrand Kobayashi, Members of the Committee on Health,

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 prescribed 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

To: Chair John M. Mizuno
Vice Chair Bertrand Kobayashi
Members of the Committee on Health

From: Karen Tan, ND, MAcOM, LAc
Center for Innovative Medicine LLC

Re: HB673, Relating to Medical Cannabis
February 5, 2019 at 9:45 am, Conference Room 329

Position: STRONG SUPPORT

- I am a naturopathic physician and licensed acupuncturist practicing in Hawaii for the past 24 years in Honolulu
- 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 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 prescribed medical cannabis in other states, such as Arizona, Washington 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,

Karen Tan, ND, MAcOM, LAc

HB-673

Submitted on: 2/3/2019 6:44:33 PM

Testimony for HLT on 2/5/2019 9:45:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Franz Weber	Individual	Support	No

Comments:

- 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 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 prescribed medical cannabis in other states, such as Oregon, Washington, 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.

HB-673

Submitted on: 2/3/2019 7:29:31 PM

Testimony for HLT on 2/5/2019 9:45:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Diana	Individual	Support	No

Comments:

HB-673

Submitted on: 2/3/2019 7:55:30 PM

Testimony for HLT on 2/5/2019 9:45:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Sarah Sarkis	Individual	Support	No

Comments:

HB-673

Submitted on: 2/3/2019 8:25:19 PM

Testimony for HLT on 2/5/2019 9:45:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Pavel Yushin	Individual	Support	No

Comments:

Naturopathic physicians should be able to prescribe medical Cannabis, as they strongly rely on natural remedies. It should be citizen's unalienable right to have unhampered access to medical Cannabis whether through a regular doctor or Naturopathic doctor even more so.

Mahalo,

P. Yushin

HB-673

Submitted on: 2/3/2019 9:00:53 PM

Testimony for HLT on 2/5/2019 9:45:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Wesley Uemoto	Individual	Support	No

Comments:

Naturopathic doctors should have the ability to prescribe medical marijuana.

HB-673

Submitted on: 2/3/2019 9:03:07 PM

Testimony for HLT on 2/5/2019 9:45:00 AM

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

Comments:

Please Support and Send to the Legislature HB 673. Edible cannabis products are sometimes the only materials that some patients can take or tolerate.

In addition, strict processing controls for edibles has been shown effective in many States, including California, Colorado, Nevada and others. In addition, Hawaii should allow the State to purchase edible cannabis products from other States. These products have been proven to be produced in very strict processing conditions. In addition, by allowing the purchase of these products from other States should significantly be at a lower cost than if they had to be produced in the State.

Thanks for allowing me to share my comments and observations.

Mark Gordon, Waikoloa, HI.

HB-673

Submitted on: 2/3/2019 9:42:26 PM

Testimony for HLT on 2/5/2019 9:45:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Sundi sturgeon	Individual	Support	No

Comments:

My life would have been over with out the support of medicinal cannabis. I have extreme pain as I suffer from fibromyalgia and have a genetic mutation that has made me have mycotoxin illness and creates much pain. I also have degeneration of my discs and severe arthritis and migraine. I will not take prescription pain meds and I would be so grateful to be able to continue receiving support especially through naturopathic Dr. I would be on disability if it wasn't for CBD and cannabis. Thank you

Mrs Sundi Sturgeon

HB-673

Submitted on: 2/3/2019 9:58:23 PM

Testimony for HLT on 2/5/2019 9:45:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Tia Fergusson	Individual	Support	No

Comments:

HB-673

Submitted on: 2/3/2019 10:12:52 PM

Testimony for HLT on 2/5/2019 9:45:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Vicki Sakoda	Individual	Support	No

Comments:

HB-673

Submitted on: 2/3/2019 10:26:44 PM

Testimony for HLT on 2/5/2019 9:45:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Jeanne Russell	Individual	Support	No

Comments:

I believe that all physicians in the state of Hawaii should have equal prescribing rights and are therefore supportive of this bill. I believe naturopathic physicians should be allowed to provide authorization for the use of medical cannabis in patients with approved conditions.

HB-673

Submitted on: 2/3/2019 10:56:14 PM

Testimony for HLT on 2/5/2019 9:45:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Chelle Galarza	Individual	Support	No

Comments:

To: â€‹Chair John M. Mizuno

â€‹Vice Chair Bertrand Kobayashi

â€‹Members of the Committee on Health

From:â€‹ Chelle Galarza

â€‹Mother, Maui resident.

Re:â€‹HB673 Relating to Medical Cannabis

Position: STRONG SUPPORT

I support naturopathic physicians in authorizing medical cannabis to patients in Hawaii. These doctors are highly skilled and trained. They should be able to make the decision if patients need to use medical cannabis in their treatment plans. I know several other states already allow this. Please consider how it will be supporting more patients with natural medicine. It will overall create a healthier person if they can get the medicine they need from the naturopath physician they are seeing.

This will be

Thank you for the opportunity to testify on this bill.

Michelle Galarza



House Committee on Health

Rep. Joh Mizuno (Chair), Rep. Bertrand Kobayashi (Co-chair)

Testimony for HB673 – Relating to Medical Cannabis

Clifton Otto, MD - Comments

Public Hearing - Tuesday, February 5, 2019, 9:45 am, Room 329

Thank you for considering the following comments regarding this bill:

1 - A Physician's Assistant is a Physician's Assistant, not a Physician. You cannot say the two are the same when there is a separate definition under HRS 453-5.3.

Physician's Assistants already have the authority to practice under the supervision of a licensed medical doctor, which can include performing a Written Certification and providing supervision for the medical use of cannabis, as long as the Supervising Physician signs off, which would include having the Supervision Physician sign the Written Certification and the Registration Application.

2 - Naturopathic Doctors do not have authority to prescribe controlled substances in Hawaii, which means they do not have state and federal controlled substance prescriptive registration, which means they are not eligible to participate as certifying physicians with Hawaii's Medical Use of Cannabis Program. Use of controlled substances is not part of the scope of practice of a Naturopathic Doctor.

<http://cca.hawaii.gov/pvl/files/2014/08/NaturopathicFormulary010110.pdf>

3 - A controlled substance with accepted medical use cannot have the highest degree of danger. The following amendment needs to be added in order to clarify that the medical use of cannabis in Hawaii is exempt from the State's restrictions for a Schedule I controlled substance:

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.

Clifton Otto, MD

3615 Harding Avenue #304, Honolulu, HI 96816

T: 808-233-8267 F: 808-395-4720

4 – Patients continue to be restricted from the inter-island transportation of Medical Use Cannabis by local law enforcement officers at our state-owned airports because of an unauthorized enforcement of federal law, even when federal regulation specifically exempts the carriage of cannabis aboard aircraft if authorized by state law or state agency. To clarify the right of patients to transport Medical Use Cannabis for personal use between the Hawaiian islands, the following amendment needs to be made to 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.

[14 CFR 91.19 Carriage of narcotic drugs, marihuana, and depressant or stimulant drugs or substances.](#)

5 – Dispensaries can only sell products that they have made themselves under Hawaii’s Medical Use of Cannabis Act and under registration with the Narcotics Enforcement Division. CBD from state-licensed hemp producers under the 2018 Agriculture Improvement Act cannot be sold for medical use. Such CBD from other states would require FDA approval for inter-state marketing if intended for medical use. One solution would be to allow dispensaries to contract with local hemp producers, specifically for the purpose of producing CBD for medical use within the State.

6 - Hawaii’s Dispensary System is fundamentally flawed because the Legislature ignored the recommendation of the Dispensary Task Force to create a horizontally integrated production system, rather than the current vertical monopoly. This error needs to be corrected if Hawaii’s Medical Use of Cannabis Program is to be successful.

Clifton Otto, MD

3615 Harding Avenue #304, Honolulu, HI 96816

T: 808-233-8267 F: 808-395-4720

HB-673

Submitted on: 2/4/2019 12:15:16 AM

Testimony for HLT on 2/5/2019 9:45:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Alexa Untermann	Individual	Support	No

Comments:

HB-673

Submitted on: 2/4/2019 12:44:30 AM

Testimony for HLT on 2/5/2019 9:45:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Alex Steelsmith	Individual	Support	No

Comments:

To: Chair John M. Mizuno, Vice Chair Bertrand Kobayashi, and other Members of the Committee on Health

From: Alex Steelsmith
438 Hobron Lane, Ste. 314
Honolulu, HI 96815

Re: HB673, Relating to Medical Cannabis

February 5, 2019 at 9:45 am, Conference Room 329

Dear Representative John Mizuno, Representative Bertrand Kobayashi, and all other members of the Committee on Health,

As a long-time Hawaii resident, I strongly support the passage of HB673, relating to medical cannabis. Naturopathic physicians are licensed as primary care providers in the State of Hawaii, and many thousands of residents use naturopathic doctors as their primary physicians. HB673 would give a substantial portion of our population access to medical use of cannabis for conditions approved for its use. Naturopathic physicians have significantly more training than APRNs, who are currently authorized to provide certification for medical use of cannabis. Naturopathic physicians also have significantly more training than physician's assistants, who are listed in this bill to have authorization for medical use of cannabis. In addition, naturopathic physicians are authorized to prescribe medical cannabis in other states such as Arizona, Washington, and Vermont.

Thank you for your consideration.

Sincerely,
Alex Steelsmith

HB-673

Submitted on: 2/4/2019 3:52:02 AM

Testimony for HLT on 2/5/2019 9:45:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Connie Wong	Individual	Support	No

Comments:

I support this bill 100 %. Mahalo, Connie Wong

HB-673

Submitted on: 2/4/2019 7:28:21 AM

Testimony for HLT on 2/5/2019 9:45:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Tara Yamauchi-Lum	Individual	Support	No

Comments:

HB-673

Submitted on: 2/4/2019 8:18:41 AM

Testimony for HLT on 2/5/2019 9:45:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Jane Mier	Individual	Support	No

Comments:

I am a disabled female retired police officer. Pharmaceuticals given to me by doctors treating my severe on-duty injuries nearly killed me. While I don't support recreational use of cannabis, I do support Doctors of naturopathy prescribing cannabis to their patients. Cannabis is a product with few side effects and is not addictive. I've seen far too many people die from pharmaceuticals. I've never seen anyone die from cannabis use. Please allow the natural medicine of cannabis to be used by Naturopaths to help their suffering patients. Thank you.

HB-673

Submitted on: 2/4/2019 8:26:02 AM

Testimony for HLT on 2/5/2019 9:45:00 AM

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

Comments:

HB-673

Submitted on: 2/4/2019 9:02:13 AM

Testimony for HLT on 2/5/2019 9:45:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Babatunji Heath	Individual	Support	No

Comments:

To: Chair John M. Mizuno
Vice Chair Bertrand Kobayashi
Members of the Committee on Health

From: Landon Oponui, ND

Re: HB673, Relating to Medical Cannabis
February 5, 2019 at 9:45 am, Conference Room 329

Position: STRONG SUPPORT

I am a naturopathic physician who has practiced in Hawaii for 5 years in Honolulu. I became the first PCP to become credentialed as an in-network HMSA PCP and have served thousands of patients over my career.

Naturopathic physicians in Hawaii, including myself, 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.

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 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 medical 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. During my medical training I received 11 credits of botanical medicine. Most MD, DO, and APRN programs (all who have certification authority) receive 0, including our local medical university JABSOM, with the rare exception of elective study.

Naturopathic physicians are authorized to prescribe medical cannabis in other states, such as Arizona, Washington 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.

In Gratitude,

Landon Opunui, ND

Dr. Nathan Ehrlich, N.D.

Hawaii Licensed Naturopathic Physician
PO Box 756 Makawao, HI 96768
phone 808.572.1388 fax 808.572.1389

To: Chair John M. Mizuno
Vice Chair Bertrand Kobayashi
Members of the Committee on Health

From: Nathan Ehrlich, N.D.

Re: HB673, Relating to Medical Cannabis
February 5, 2019 at 9:45 am, Conference Room 329

Position: STRONG SUPPORT

Thank you Mr. Mizuno and all members of the committee on health for hearing my testimony for HB673. My name is Dr. Nathan Ehrlich, N.D. and I have been in practice on Maui since 1988.

I support the passage of HB673. As a Naturopathic physician I am aware we are the most trained health care professionals in the field of Botanical/Herbal medicine. We, as Naturopathic physicians, are also more highly trained than both Nurse Care practitioners and Physician assistants both whom will be authorized to prescribe medical cannabis use with passage of this bill.

As is the case with other medical issues my/our patients often expect their Naturopathic physician to be able to address their health concerns with natural options first. Medical cannabis is an option which is sometimes a safe and natural medical solution to health problems and is being widely accepted in the medical field. Naturopathic physicians are authorized to prescribe medical cannabis in other states such as Arizona, Washington and Vermont.

Thank you for the opportunity to testify on this bill.

Sincerely,

Nathan Ehrlich, ND

HB-673

Submitted on: 2/4/2019 9:05:33 AM

Testimony for HLT on 2/5/2019 9:45:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Kristine Williams	Individual	Support	No

Comments:

To: Chair John M. Mizuno

Vice Chair Bertrand Kobayashi

Members of the Committee on Health

From: Kristine Williams, ND, LAc.

Naturopathic Physician and acupuncturist

Re: HB637, Relating to Medical Cannabis

February 5, 2019 at 9:45 am, Conference Room 329

Position: STRONG SUPPORT

- I am a naturopathic physician practicing in Hawaii for the past 6 months in Honolulu and Haleiwa.

- 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 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 Oregon, Washington, 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,

Kristine Williams ND, LAc.

HB-673

Submitted on: 2/4/2019 9:06:51 AM

Testimony for HLT on 2/5/2019 9:45:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Angelea Hollander	Individual	Support	No

Comments:

HB-673

Submitted on: 2/4/2019 9:07:50 AM

Testimony for HLT on 2/5/2019 9:45:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Zach	Individual	Support	No

Comments:

As a veteran who suffers from debilitating arthritis throughout most of my major joints in addition to bilateral hip FAI which causes it's own host issues including extremely restricting range of motion and constant pain, I support HB673. I see HB673 as a natural pathway to easing the burden my body puts on me. I take great care ensuring the method of treatment I use for overall health is natural, and on going. My exercise routine is strict along with my eating habits to ensure I'm doing my part to keep my body functioning as well as I can. Sometimes, however, the pain is just too much and a narcotic is the only thing that eases it. Although pain medication in the form of narcotics do alleviate my symptoms, it is in no way a natural remedy and always leaves me feeling better in the joints, but worse everywhere else. This is not a long term solution. Passing HB673 is the key for Hawaii to further progress towards utilizing it's natural environment to help keep it's inhabitants from suffering extreme, long term pain. Please consider this testimony when voting on HB673.

To: Chair John M. Mizuno
Vice Chair Bertrand Kobayashi
Members of the Committee on Health

From: Sharon Brown

Re: HB637, Relating to Medical Cannabis
February 5, 2019 at 9:45 am, Conference Room 329

Position: STRONG SUPPORT

- 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 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 Oregon, Washington, 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,

Sharon Brown

HB-673

Submitted on: 2/4/2019 9:12:35 AM

Testimony for HLT on 2/5/2019 9:45:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Lori kimata	Individual	Support	No

Comments:

Aloha honorable chair, vice chair and committee members,

I am 4th generation Hawaii resident and a naturopathic physician practicing for 30 years. Please see testimony and amendments suggested by HSNP legislative chair Dr. Michael Traub. Thank you for your time and consideration.

HB-673

Submitted on: 2/4/2019 9:26:35 AM

Testimony for HLT on 2/5/2019 9:45:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Renee Goodwin	Individual	Support	No

Comments:

ND go through the same rigger and Medical School as a MD. They order labs, diagnose, perscribe medicine. Why wouldn't the State grant them the same right to treat their patience as they see fit.

Yes, I support the right for an ND to perscribe Medical Cannabis.

HB-673

Submitted on: 2/4/2019 9:31:36 AM

Testimony for HLT on 2/5/2019 9:45:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Cheri Wood	Individual	Support	No

Comments:

HB-673

Submitted on: 2/4/2019 9:47:54 AM

Testimony for HLT on 2/5/2019 9:45:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Kathryn Taketa-Wong	Individual	Support	No

Comments:

To: Chair John M. Mizuno

Vice Chair Bertrand Kobayashi

Members of the Committee on Health

From: Kathryn Taketa-Wong, ND

Re: HB637, Relating to Medical Cannabis

February 5, 2019 at 9:45 am, Conference Room 329

Position: STRONG SUPPORT

• I am a naturopathic physician practicing in Hawaii for the past 8 years in Honolulu. My specialty is working with children and adults with autism and other special needs and I have been trained through the Medical Academy of Pediatric Special Needs. Rep Mizuno I met you at the recent KELII Foundation Fundraiser last year and am on the board of the KELII Foundation. Many individuals with severe autism could benefit from having medical cannabis allowed to help with their behaviors, and I support the senate bill proposing adding severe autism to the list of allowed conditions for medical cannabis. This bill will allow me to prescribe medical cannabis to many patients who critically need it, including cancer patients and patients with severe pain, and if the senate bill passes, also for my patients with autism with severe behaviors and aggression.

A few other points:

• 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 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 Oregon, Washington, 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,

Kathryn Taketa-Wong, ND

HB-673

Submitted on: 2/4/2019 9:48:32 AM

Testimony for HLT on 2/5/2019 9:45:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Douglas Rucker	Individual	Support	No

Comments:

HB-673

Submitted on: 2/4/2019 9:54:47 AM

Testimony for HLT on 2/5/2019 9:45:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Rupali Embry	Individual	Support	No

Comments:

I believe that all physicians in the state of Hawaii should have equal prescribing rights and am therefore in support of this bill.

Signed,
Cheryl L. Embry
Honolulu, Hawaii

HB-673

Submitted on: 2/4/2019 10:04:59 AM

Testimony for HLT on 2/5/2019 9:45:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Raymond Chun	Individual	Support	No

Comments:

To: Chair John M. Mizuno
Vice Chair Bertrand Kobayashi
Members of the Committee on Health

From: Shanon Sidell, ND
Waikoloa Village
Hawaii County

Re: HB637, Relating to Medical Cannabis
February 5, 2019 at 9:45 am, Conference Room 329

Position: **STRONG SUPPORT**

As a licensed naturopathic physician providing primary care in Hawaii County, I see a wide range of conditions in my patient population. Some of these patients have verifiable need for the medicinal use of medical cannabis.

It would seem reasonable, if not necessary, for their primary care doctor who prescribes and manages their medications, to also prescribe and manage their medical cannabis.

At this point in time, these patients must seek out another practitioner specifically for the prescribing of this medicine.

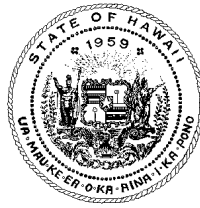
Naturopathic physicians have the most comprehensive herbal medicine training of any licensed health care provider in the state of Hawaii. They have training in indications, mechanism of action, contraindications, and interactions with other medications.

Please consider this important piece of legislation for the appropriate management of our patients' medications and the improved quality of patient care.

Thank you,

Shanon Sidell, ND

DAVID Y. IGE
GOVERNOR



STATE OF HAWAII
DEPARTMENT OF PUBLIC SAFETY
919 Ala Moana Boulevard, 4th Floor
Honolulu, Hawaii 96814

NOLAN P. ESPINDA
DIRECTOR

Maria C. Cook
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Corrections

Renee R. Sonobe Hong
Deputy Director
Law Enforcement

No. _____

TESTIMONY ON HOUSE BILL 673
RELATING TO MEDICAL CANNABIS.

By

Nolan P. Espinda, Director
Department of Public Safety

House Committee on Health
Representative John M. Mizuno, Chair
Representative Bertrand Kobayashi, Vice Chair

LATE

Tuesday, February 5, 2019; 9:45 a.m.
State Capitol, Conference Room 329

Chair Mizuno, Vice Chair Kobayashi, and Members of the Committee:

The Department of Public Safety (PSD) offers comments on House Bill (HB) 673, which proposes to allow naturopathic physicians and physician assistants, practicing under supervision, to provide written certification for qualifying patients to improve access to medical cannabis. If this bill were to pass in its current form, PSD's Narcotics Enforcement Division would not be able to issue controlled substance registrations to naturopathic physicians and physician assistants as intended.

First, section 11-160-11 of the Department of Health's, Hawaii Administrative Rules ("HAR") requires physicians and advanced practice registered nurses (APRNs) to obtain a valid Hawaii controlled substances registration before they can issue any written medical cannabis certifications. That section requires that "[a]ny physician issuing a written certification shall . . . [b]e registered with the Department of Public Safety pursuant to section 329-32, HRS." As such, all physicians must hold a valid State of Hawaii Controlled Substances Registration issued by PSD to issue written certifications for medical cannabis.

Similarly, Act 230 (Session Laws of Hawaii 2016) provides for the same registration requirement for advanced practice registered nurses (“APRNs”) to issue written certifications for medical cannabis. Act 230 (2016) defined “Advanced Practice Registered Nurse” as a “...nurse with prescriptive authority as described in section 457-8.6 and registered under section 329-32.”

Unlike the requirement for physicians and APRNs, HB 673 does not mandate that either naturopathic physicians or physician assistants hold a Hawaii controlled substance registration. If this measure were to pass, PSD recommends that the same requirement that naturopathic physicians and physician assistants obtain a Hawaii Controlled Substances Registration before issuing written medical cannabis certifications be included. This would ensure that all practitioners who issue written medical cannabis certifications equally fall under the same standard.

Second, 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.

Third, if HB 673 were to pass as is, PSD would be unable to issue a controlled substance registration to physician assistant unless the physician assistance was specifically authorized to do so in writing by his/her supervisor. Physician assistants gain their authority to do work based on the physician assistant’s relationship with their supervising physician. Under section 16-85-49.1 of the Hawaii Board of Medicine’s HARs, “A physician assistant shall be considered agents of the physician assistant’s

supervising physician in the performance of all practice-related activities as established in writing by the employer.” Furthermore, section 16-85-49.1, HAR, also states that physician assistants are authorized to prescribe, dispense, and administer medications and medical devices to the extent delegated by the supervising physician.”

Thank you for the opportunity to testify on this measure.

LATE

February 4, 2019

To: Chair John M. Mizuno
Vice Chair Bertrand Kobayashi
Members of the Committee on Health

From: Miles Greenberg, ND
Legislative Committee member
Hawaii Society of Naturopathic Physicians

Re: **HB673, Relating to Medical Cannabis**
February 5, 2019 at 9:45 am, Conference Room 329

To the Honorable Chair, Vice-Chair and members of the Committee on Health,

I am a naturopathic physician practicing full time in Hawaii for the past 29 years in Lihue/Kilauea and currently serve as Legislative Committee member for the Hawaii Society of Naturopathic Physicians.

- 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 an excellent safety record in the State of Hawaii
- 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 prescribed medical cannabis in other states: Arizona, Washington 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. Please SUPPORT HB 673

Sincerely,

Miles Greenberg, ND

LATE

HB-673

Submitted on: 2/4/2019 8:23:29 PM

Testimony for HLT on 2/5/2019 9:45:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Susan Chong	Individual	Support	No

Comments:

Naturopathic Physicians are more attuned to their patients' medical histories and follow and track their progress in the fight against chronic diseases. I have a pre-existing qualification to sign up for medical cannabis (Parkinson's Disease) but have not signed up yet due to the fact that it is difficult to find a MD which would take a personal interest in tracking my disease and the effects of treatments. I would strongly support allowing Naturopathic Physicians to certify patients for the application of medical cannabis. Thank you.

LATE

HB-673

Submitted on: 2/5/2019 1:55:09 AM

Testimony for HLT on 2/5/2019 9:45:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Dr. Rachel Klein	Individual	Support	No

Comments:

Chair John M. Mizuno

â€‹Vice Chair Bertrand Kobayashi

â€‹Members of the Committee on Health

From:â€‹ Rachel Klein, ND, DC, DACNB, FIBFN-CNDH

â€‹

Re:â€‹HB673, Relating to Medical Cannabis

â€‹February 5, 2019 at 9:45 am, Conference Room 329

Position: STRONG SUPPORT

- I am a naturopathic physician practicing in Hawaii for the pas 5 years in Hilo, and currently serve as President of the Hawaii Society of Naturopathic Physicians.

- 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 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.

- 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,

Rachel Klein, ND, DC, DACNB, FIBFN-CNDH

LATE

HB-673

Submitted on: 2/5/2019 8:04:41 AM

Testimony for HLT on 2/5/2019 9:45:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Melodie Aduja	O`ahu County Committee on Legislative Priorities of the Democratic Party of Hawai`i	Support	No

Comments: