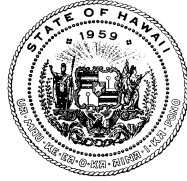


DAVID Y. IGE
GOVERNOR OF HAWAII



ELIZABETH A. CHAR, M.D.
DIRECTOR OF HEALTH

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

Testimony COMMENTING on HCR 132, HD 1
REQUESTING THE DEPARTMENT OF HEALTH TO SUBMIT A REQUEST TO THE
DRUG ENFORCEMENT ADMINISTRATION FOR AN EXCEPTION TO REGULATIONS
AND A PETITION TO INITIATE PROCEEDINGS FOR FEDERAL RULEMAKING TO
CLARIFY THAT THE STATE-AUTHORIZED USE OF MEDICAL CANNABIS DOES
NOT VIOLATE THE FEDERAL CONTROLLED SUBSTANCES ACT

REPRESENTATIVE MARK NAKASHIMA, CHAIR
HOUSE COMMITTEE ON JUDICIARY & HAWAIIAN AFFAIRS
Hearing Date: 3/29/2021 Room Number: 325

1 **Fiscal Implications:** None.

2 **Department Testimony:** The department appreciates the intent of HCR 132, which attempts to
3 clarify that state-authorized medical use of cannabis does not violate the Federal Controlled
4 Substances Act by requesting the Department of Health to submit a request to the Drug
5 Enforcement Administration (DEA) for an exception to regulations and to submit a petition to
6 initiate proceedings for federal rulemaking. The resolution also requires the department to
7 include the following wording in its petition: "persons using marijuana in compliance with state
8 law are exempt from registration" (page 2, lines 35-36).

9 Obtaining an exception from the Federal Controlled Substance Act for the state-authorized use of
10 medical cannabis would potentially benefit the State's residents. However, the department's
11 understanding is that 21 CFR § 1308.35 precludes petitioning the DEA to reschedule or exempt
12 any processed plant material containing any amount of tetrahydrocannabinol (THC) that is used
13 or intended for use for human consumption. Since the purpose of the medical cannabis
14 provisions in Chapter 329, HRS, is expressly to permit registered patients to use cannabis,
15 including by consuming it, Chapter 329, HRS permits human consumption of THC, and it is
16 therefore highly unlikely the DEA would entertain the department's request as the request would
17 violate 21 CFR § 1308.35.

1 Furthermore, the wording of the resolution with respect to registration, "persons using marijuana
2 in compliance with state law are exempt from registration," (page 2, lines 35-36), raises concerns
3 because it could confuse qualifying patients, qualifying out-of-state patients, and their
4 caregivers. This wording could lead patients and their caregivers to believe that they are not
5 required to register with the department to use cannabis for medical purposes. By failing to
6 register with the department, patients and caregivers could expose themselves to criminal
7 liability related to their medical use of cannabis.

8 **Offered Amendments:** None.

9 Thank you for the opportunity to submit testimony.



Akamai Cannabis Clinic
3615 Harding Ave, Suite 304
Honolulu, HI 96816

TESTIMONY ON HOUSE CONCURRENT RESOLUTION 132 HOUSE DRAFT 1
REQUESTING DOH TO FILE FOR FEDERAL EXEMPTION

By
Clifton Otto, MD

House Committee on Judiciary and Hawaiian Affairs
Representative Mark M. Nakashima, Chair
Representative Scot Z. Matayoshi, Vice Chair

Monday, March 29, 2021; 2:00 PM
State Capitol, Videoconference

Thank you for the opportunity to provide testimony in **STRONG SUPPORT** of this measure.

It has been nearly twenty-one years since Hawaii exercised its constitutional authority to decide how controlled substances are used within the state and created a state regulated medical cannabis program.

However, by doing so, a conflict was created between the federal regulation of marijuana and the state authorized use of cannabis for medical purposes in Hawaii. This conflict has created numerous unintended consequences that have negatively impacted our medical cannabis patients and dispensaries for years.

This resolution is a first step towards resolving this conflict and harmonizing the state and federal regulation of cannabis. Such harmonization is necessary to end the current discrimination against our patients and dispensaries and to reign in a disregard for the rule of law that is encouraging criminal activity across the State.

Allow me to address concerns that the Department of Health (DOH) raised in its written testimony on this measure for the public hearing held by the House Committee on Health, Human Services, & Homelessness on March 23, 2021.

In its written testimony on HCR132, DOH stated:

“Obtaining an exception from the Federal Controlled Substance Act for the state-authorized use of medical cannabis would potentially benefit the State's residents. However, the department's understanding is that 21 CFR § 1308.35 precludes petitioning the DEA to reschedule or exempt any processed plant material containing

any amount of tetrahydrocannabinol (THC) that is used or intended for use for human consumption.”

Let’s take a closer look at this federal exemption:

[21 CFR 1308.35:](#)

“§1308.35 Exemption of certain cannabis plant material, and products made therefrom, that contain tetrahydrocannabinols.

(a) Any processed plant material or animal feed mixture containing any amount of tetrahydrocannabinols (THC) that is both:

(1) Made from any portion of a plant of the genus Cannabis excluded from the definition of marijuana under the Act [i.e., the mature stalks of such plant, fiber produced from such stalks, oil or cake made from the seeds of such plant, any other compound, manufacture, salt, derivative, mixture, or preparation of such mature stalks (except the resin extracted therefrom), fiber, oil, or cake, or the sterilized seed of such plant which is incapable of germination] and (2) Not used, or intended for use, for human consumption, has been exempted by the Administrator from the application of the Act and this chapter.”

Basically, this federal rule exempts from the Schedule I list products made for animals from parts of the cannabis plant that fall outside the federal definition of marijuana (ie. stems, sterilized seeds) that may contain trace amounts of THC.

An exemption for cannabis material that falls outside the federal definition of marijuana and is not intended for human use does not preclude an exemption that would simply recognize a state’s authority to decide how controlled substances are used within the state.

A federal administrative rule ([21 CFR 1308.11](#)) does not pre-empt an authority reserved to the states by the U.S. Constitution. It is the unconstitutional application of the federal Schedule I rule for marijuana to Hawaii’s Medical Cannabis Program, and the negative consequences this is inflicting upon our patients and dispensaries, that makes a federal exemption so necessary.

DOH also raised concerns about the wording of the proposed rule in this resolution. The language “persons using marijuana in compliance with state are exempt from registration” is important because it ensures that patients do not need to get federal Schedule I registration from the DEA, which is nearly impossible to obtain, in order to engage in the state authorized use of cannabis for medical purposes in Hawaii.

Because this wording would appear in a federal regulation, it should be clear that the exemption from registration applies to federal registration with the DEA and not registration with Hawaii’s Medical Cannabis Registry Program. If DOH is concerned that the wording of such a federal exemption will be construed by patients to mean that they don’t need to register with the program, then DOH could easily provide patient

education under the education requirement of the [Medical Cannabis Registry and Regulation Special Fund](#) so that such misunderstanding does not occur.

In addition, please consider the following minor edits for clarity and consistency:

WHEREAS, Act 228, Session Laws of Hawaii 2000 (Act 228), was enacted, making Hawaii the first state via the legislative process to authorize the medical use of [~~medical marijuana to treat~~] cannabis for debilitating medical conditions including cancer, glaucoma, human immunodeficiency virus, acquired immune deficiency syndrome, and other chronic or debilitating diseases; and

WHEREAS, at the time Act 228 was enacted there was ample evidence to show that medical [~~marijuana~~] cannabis helps to alleviate pain and has other benefits for severely ill patients; and

~~[WHEREAS, federal law expressly prohibits the use of marijuana, despite the evidence of the benefits of using medical cannabis, and]~~

WHEREAS, [~~this lack of clarity between state and federal marijuana laws~~] the current conflict between the state authorized use of cannabis for medical purposes in Hawaii and the federal regulation of marijuana has repercussions for medical cannabis patients and the State's medical cannabis dispensaries, including loss of employment and discrimination in child custody hearings, federally subsidized housing, and applications for federal firearms permits, life insurance, and disability insurance for patients who use medical cannabis in compliance with state law; and

WHEREAS, Title 21 Code of Federal Regulations section 1307.03 allows the Administrator of the Drug Enforcement Administration to grant exceptions to certain federal regulations; and

HCR132 HD1 Written Testimony

March 29, 2021

Page 4

WHEREAS, obtaining an exception from the [~~federal Controlled Substances Act~~] Drug Enforcement Administration for the state-authorized use of [~~medical~~] cannabis would benefit the State's residents who use [~~medical~~] cannabis for medical purposes and the State's medical cannabis dispensaries; now, therefore, BE IT RESOLVED by the House of Representatives of the Thirty-first Legislature of the State of Hawaii, Regular Session of 2021, the Senate concurring, that the Department of Health is requested to submit [~~a request~~] an application to the Drug Enforcement Administration for an immediate exception to regulations and a petition to initiate proceedings for federal rulemaking to clarify that the state-authorized use of [~~medical~~] cannabis does not violate the federal Controlled Substances Act; and

BE IT FURTHER RESOLVED that when [~~making the request~~] submitting an application for an exception to regulations in accordance with Title 21 Code of Federal Regulations section 1307.03, the Department of Health is urged to argue that Hawaii's medical cannabis laws do not create any positive conflict with state or federal drug laws and to request a written acknowledgement from the Drug Enforcement Administration that the listing of marijuana as a controlled substance in Schedule I of the federal Controlled Substances Act does not apply to the [~~non-prescription~~] state authorized use of cannabis under Hawaii's medical cannabis registry and medical cannabis dispensary programs; and

BE IT FURTHER RESOLVED that when making a petition for federal rule making in accordance with Title 21 Code of Federal Regulations section 1308.43, the Department of Health is urged to offer the following proposed [~~language~~] rule: "\$1307.

State Authorization. The listing of marijuana as a controlled substance in Schedule I does not apply to the state-authorized use of marijuana, and persons using marijuana in compliance with state law are exempt from registration.”; and

BE IT FURTHER RESOLVED that certified copies of this Concurrent Resolution be transmitted to the members of Hawaii’s Congressional Delegation, Governor, Attorney General, and Director of Health.

Thank you for considering these suggestions for changes.

Aloha.



To: Rep Mark M. Nakashima, Chair

Rep Scot Z. Matayoshi, Vice Chair

Members of the Committee on Judiciary & Hawaiian Affairs

Fr: Jaclyn L. Moore, Pharm.D., CEO Big Island Grown Dispensaries

Re: Testimony in Support of HCR132

REQUESTING THE DEPARTMENT OF HEALTH TO SUBMIT A REQUEST TO THE DRUG ENFORCEMENT ADMINISTRATION FOR AN EXCEPTION TO REGULATIONS AND A PETITION TO INITIATE PROCEEDINGS FOR FEDERAL RULEMAKING TO CLARIFY THAT THE STATE-AUTHORIZED USE OF MEDICAL CANNABIS DOES NOT VIOLATE THE FEDERAL CONTROLLED SUBSTANCES ACT.

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

Big Island Grown Dispensaries is one of eight dispensary licensees in the State. We operate a production facility and 3 retail locations on the Big Island of Hawaii. Our medical cannabis operation currently employs 60+ Big Island residents. We submit testimony today in **support of HCR132, and view this as a huge step forward for the medical cannabis program, and the patients the program serves.**

We appreciate the efforts, and the steps this committee is taking to clarify that the State authorized use of medical cannabis does not violate the federal controlled substance act. These efforts, and subsequent progress made will ultimately benefit 329 qualifying patients that continue to face discrimination despite functioning within a State legal medical cannabis program.

Thank you for the opportunity to testify.

Jaclyn L. Moore, Pharm.D., CEO Big Island Grown Dispensaries

HCR-132-HD-1

Submitted on: 3/25/2021 5:25:05 PM

Testimony for JHA on 3/29/2021 2:00:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Kevin Rauhe	Individual	Support	No

Comments:

This resolution clarifies the state's view on medical cannabis to align with all other doctor prescribed medicines. I think all medical cannabis bills should be thought of with that mindset, otherwise there is a slippery slope toward viewing cannabis as a product to tax and profit from. What other medications will become stigmatized and taxed?

Carl Olsen
130 NE Aurora Ave
Des Moines, Iowa 50313-3654
515-343-9933
carl@carl-olsen.com

Testimony COMMENTING on HCR 132

Request to the Drug Enforcement Administration for an exception to the Regulations

Representative Mark M. Nakashima
House Committee on Judiciary & Hawaiian Affairs
Hearing Date: 3/29/2021 Room Number: 325

HCR 132 is before you today because of work I started here in Iowa in January of 2019, asking my state to file for a federal exemption to protect our medical cannabis patients, using the process in the Code of Federal Regulations, 21 C.F.R. § 1307.03.

My argument comes from an inconsistency in *Gonzales v. Raich*, 545 U.S. 1 (2005) and *Gonzales v. Oregon*, 546 U.S. 243 (2006), along with my own efforts to obtain a federal exemption, *Olsen v. Drug Enforcement Administration*, 848 F.2d 1458 (D.C. Cir., 1989), cited in *Employment Division v. Smith*, 494 U.S. 872, 889 (1990).

In *Raich*, the court found that state laws authorizing the use of cannabis do not retroactively nullify federal drug laws.

California's decision (made 34 years after the CSA was enacted) to impose "stric[t] controls" on the "cultivation and possession of marijuana for medical purposes," . . . , cannot retroactively divest Congress of its authority under the Commerce Clause.

Id., 545 U.S., at 29 n.38.

We do note, however, the presence of another avenue of relief. As the Solicitor General confirmed during oral argument, the statute authorizes procedures for the reclassification of Schedule I drugs.

Id., 545 U.S., at 33.

Petitions to reschedule are the most common administrative remedy for avoiding positive conflict between state and federal drugs laws, although not the only administrative remedy. See *Americans for Safe Access v. DEA*, 706 F.3d 438 (D.C. Cir. 2013); then see 21 C.F.R. § 1307.31.

In *Oregon*, the court found that the “accepted” use of a controlled substance is whatever state law says it is, but none of the substances in the Oregon law were in federal Schedule I. So, the issue of scheduling was never reached in that case.

The Attorney General has rulemaking power to fulfill his duties under the CSA. The specific respects in which he is authorized to make rules, however, instruct us that he is not authorized to make a rule declaring illegitimate a medical standard for care and treatment of patients that is specifically authorized under state law.

Id., 546 U.S., at 258.

There is a federal exemption for a substance in federal Schedule I, peyote. See, 21 C.F.R. § 1307.31. The executive branch created this exemption for peyote in 1966 based on a California Supreme Court decision in 1964, *People v. Woody*, 61 Cal. 2d 716, 394 P.2d 813, 40 Cal. Rptr. 69 (1964).

See, [Congressional Record, July 8, 1965](#) 111 Cong. Rec. 15977

See, [Federal Register, March 19, 1966](#) 31 Fed. Reg. 4679

See, [21 C.F.R. § 166.3\(c\)\(3\) \(1968\)](#)

See, [U.S. House Hearings, February 3, 1970](#) Pages 117-118

The exemption was carried over in 1970 when the current federal drug laws were created.

The peyote exemption is not statutory. It exists only because the statute gives the federal administration the power to grant exemptions to the regulations. The schedules are regulations. See, 21 C.F.R. § 1308.11.

If state court decisions are sufficient for a federal executive branch exemption, then state statutes are just as valid. State court rulings are laws just like state statutes, but they are not higher or lower. They are equal.

In *Olsen*, the court found that Olsen’s use of cannabis was unlimited and drew a distinction between Olsen’s religious use of cannabis and the religious use of peyote in *Woody*. Olsen offered to create some restrictions, but the court found Olsen’s offer to be disingenuous.

Because the tenets of the Ethiopian Zion Coptic Church endorse marijuana use every day throughout the day, however, Olsen’s proposal for confined use would not be self-enforcing.

Id., 848 F.2d, at 1462.

State laws, on the other hand, are clearly defined in state statutes and state regulations, distinguishing them from Olsen’s unlimited use.

Based on the foregoing, it is this author's opinion that denying an exemption for state authorized use of cannabis would be an abuse of discretion under 21 C.F.R. § 1307.03.

Olsen presented this argument to the board that regulates the state medical cannabis program in Iowa in February of 2019 by asking if everything authorized by the program was a violation of federal law. In August of 2019, the board voted unanimously to recommend the Iowa Department of Public Health obtain an exemption from federal drugs laws using the application process in 21 C.F.R. § 1307.03. In June of 2020, the Iowa legislature enacted HF 2589, which requires the Iowa Department of Public Health to obtain federal funding guarantees for state educational and health care institutions that allow state authorized use of medical cannabis. In September of 2020, the Iowa Department of Public Health said the only way to obtain federal funding guarantees was by obtaining an exemption using the process in 21 C.F.R. § 1307.03. Attached is the presentation the department made to the board on September 4, 2020.

If you have any questions, I would be glad to answer them.

Thank you for taking time to address this matter.



--

Carl Olsen

130 E. Aurora Ave.

Des Moines, IA 50313-3654

515-343-9933

carl@carl-olsen.com

IDPH Strategy: Seeking DEA Exemption

- In their 2019 Annual Report, the Board recommended that IDPH seek protections for schools and facilities participating in our program and acting in compliance with Chapter 124E.
- The General Assembly prescribed in HF2589 that IDPH “seek guarantees” that Federal funding to institutions and facilities acting in compliance with Chapter 124E not have their funding withheld due to participation in Iowa’s program.
- The Department has determined that it will move forward with seeking an exception for cannabis as a schedule I substance in Iowa from the DEA, in attempt to minimize conflict between State and Federal Law.
- The Department will seek this exception using Title 21 Code of Federal Regulations 1307.03.

Sec. 31. PROTECTION OF FEDERAL FUNDING. The department of public health shall request guarantees from the agencies of the federal government providing funding to educational and long-term care facilities that facilities with policies allowing patients to possess medical cannabidiol on the grounds of the facilities consistent with chapter 124E or allowing facility staff to administer medical cannabidiol to a patient shall not lose eligibility for any federal funding due to such policies.

§1307.03 Exceptions to regulations.

Any person may apply for an exception to the application of any provision of this chapter by filing a written request with the Office of Diversion Control, Drug Enforcement Administration, stating the reasons for such exception. See the Table of DEA Mailing Addresses in **Sec. 1321.01** of this chapter for the current mailing address. The Administrator may grant an exception in his discretion, but in no case shall he/she be required to grant an exception to any person which is otherwise required by law or the regulations cited in this section.

[75 FR 10678, Mar. 9, 2010]

TO: The COMMITTEE ON JUDICIARY & HAWAIIAN AFFAIRS
From: Wendy Gibson-Viviani RN/BSN
RE: HCR132 HD1 (**In Support**)
HEARING Monday, March 29, 2021 at 2:00 PM VIA VIDEOCONFERENCE

Dear Rep. Mark M. Nakashima, Chair, Rep. Scot Z. Matayoshi, Vice Chair and Members of the Committee,

My name is Wendy Gibson-Viviani R.N. and I am an active member of the American Cannabis Nurses Association and the Cannabis Nurses Network. I have been a medical cannabis patient advocate in Hawaii for 16 of the 28 years I have lived her. I'm writing today in strong SUPPORT of HCR132. I believe it will benefit our more than 31, 000 patients registered in the medical cannabis program in Hawaii.

In 1971 Richard Nixon declared drug abuse to be “Enemy number ONE” and launched a vicious, **racist** War on Drugs—now known as a War on People who use marijuana. It specifically targeted Nixon’s enemies: Vietnam War protesters and black people. Nixon promoted making marijuana and heroin illegal to disrupt Hippy and Black communities. Nixon’s counsel and former Assistant to the President, John Ehrlichman later revealed that:

“We knew we couldn’t make it illegal to be either against the war or black. But by getting the public to associate the hippies with marijuana and blacks with heroin, and then criminalizing both heavily, we could disrupt those communities. We could arrest their leaders, raid their homes, break up their meetings, and vilify them night after night on the evening news”.

And so, marijuana (AKA marihuana) was placed into the **Schedule I drug** assignment (in the Controlled Substance Act). This CSA category is reserved for drugs distinguished as being the most dangerous drugs on the planet, drugs and have **no “accepted” medicinal use** and cannot be used safely even under medical supervision. This Schedule I assignment was never based upon public health or safety issues. It was **not based upon any science** about the habit-forming, non-toxic, medicinal plant, “Marijuana/Marihuana”.

In 2000, Hawaii legislators **accepted the medical use for cannabis** and created a conflict between Federal and State Law.

In 2017, the National Academies of Science, Engineering and Medicine published Health Effects of Cannabis and Cannabinoids, a review of over 10,000 cannabis studies. They found strong scientific evidence supporting the use of cannabis:

- For the treatment of chronic pain in adults (using all forms of cannabis)
- As antiemetics (anti-nausea) in the treatment of chemotherapy-induced nausea and vomiting (in the form of oral cannabinoids)
- For improving patient-reported multiple sclerosis spasticity symptoms (oral cannabinoids)

To date, 35 U.S. States, 4 U.S. territories, and the District of Columbia, allow cannabis for medical purposes.

This conflict between State and Federal Government has led to the mistreatment and discrimination of medical cannabis users at work, at home, at school and in the medical healthcare system. Patients face loss of employment, housing, disability insurance, life insurance and risk having their medicine taken away from them if they try to use it when they are in a hospital.

The US Congress has prohibited the Federal DOJ from spending money to criminalize and prosecute medical cannabis programs that are following State laws.

HCR 132 is a good first step towards resolving the State/Federal Govt conflict and harmonizing the regulation of cannabis. Such harmonization is necessary to end the current discrimination against our patients and dispensaries.

Please support passage of this resolution.

Thank you for the opportunity to provide testimony,

Wendy Gibson-Viviani RN/BSN Cannabis Nurse Educator
Kailua Resident

HCR-132-HD-1

Submitted on: 3/27/2021 8:21:55 PM

Testimony for JHA on 3/29/2021 2:00:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Dana Keawe	Individual	Support	No

Comments:

I support hcr132 hd1

HCR-132-HD-1

Submitted on: 3/28/2021 10:45:50 AM

Testimony for JHA on 3/29/2021 2:00:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Tyler Crook	Individual	Support	No

Comments:

Aloha Senators and Reps of Hawaii,

Please SUPPORT this bill. We need clarification and common sense laws surrounding Cannabis. We have great opportunity in the state of Hawaii but we are sadly falling behind quickly vs states like Oklahoma who have a booming Cannabis Industry that allows all to participate while protecting it's residents. We need your help to shape a better future for the Cannabis Industry in Hawaii.

Mahalo for your time and consideration,

Tyler Crook

HCR-132-HD-1

Submitted on: 3/28/2021 10:55:38 AM

Testimony for JHA on 3/29/2021 2:00:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Tyler Crook	Individual	Support	No

Comments:

Aloha Senators and Reps of Hawaii,

Please SUPPORT this bill. We need clarification and common sense laws surrounding Cannabis. We have great opportunity in the state of Hawaii but we are sadly falling behind quickly vs states like Oklahoma who have a booming Cannabis Industry that allows all to participate while protecting it's residents. We need your help to shape a better future for the Cannabis Industry in Hawaii.

Mahalo for your time and consideration,

Tyler Crook

HCR-132-HD-1

Submitted on: 3/28/2021 11:07:21 AM

Testimony for JHA on 3/29/2021 2:00:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Chrissie Brown	Individual	Support	No

Comments:

Aloha Committee Members,

I am submitting testimony in STRONG SUPPORT of HCR132.

This resolution is imperative for clarifications regarding the regulation of Cannabis in Hawaii.

The federal Schedule I list is an administrative rule, not a law, and administrative rules do not pre-empt an authority reserved to the states by the U.S. Constitution to decide how controlled substances are used within the state.

Please pass this resolution.

Thank you,

Chrissie Brown

HCR-132-HD-1

Submitted on: 3/28/2021 12:34:48 PM

Testimony for JHA on 3/29/2021 2:00:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Joseph Franson	Individual	Support	No

Comments:

I support bill HCR 132,

Joseph Franson

HCR-132-HD-1

Submitted on: 3/28/2021 12:38:23 PM

Testimony for JHA on 3/29/2021 2:00:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Rita L Manderfeld	Individual	Support	No

Comments:

Please vote to support bill HCR132.

Rita Mandefeld

HCR-132-HD-1

Submitted on: 3/28/2021 1:30:45 PM

Testimony for JHA on 3/29/2021 2:00:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Rayden Keaulana	Individual	Support	No

Comments:

I believe this bill will help the good hard working people that love their jobs and go above and beyond but live in fear that a failed drug test for Cannabis will ruin their whole career. Please help protect these people aloha.

March 29, 2021

RE: HB132 HD1

Testimony – Kai Luke

Ending the Federal Conflict with Cannabis in Hawai'i.

Hi, my name is Kai Luke. I am in favor and support HB132 HD1.

As a previous worker in the Vertical Cannabis System in Hawaii for 3 Years, I have learned that the need for transparency is needed to grow together in best interest of all shareholders.

By supporting bill HB132, this would allow the State of Hawaii to exercise our rights to have State-Authorized use of medical Cannabis be declared just as other states have and open the doors to providing more education in many of the places, we need it, like Law & Enforcement, Health & Wellness, and Caretakers and Community.

I would love for a chance and opportunity to provide more feedback and opinion.

Please contact me. I appreciate your time. Thank you.

Sincerely,

Kai Luke

Kai Luke