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KE KIA'ÂINA O KA MOKU'ÂINA 'O HAWAI'I

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Testimony in OPPOSITION to SB2461 SD2 HD1
RELATING TO MEDICAL CANNABIS

REPRESENTATIVE DELLA AU BELATTI, CHAIR
HOUSE COMMITTEE ON HEALTH & HOMELESSNESS

Hearing Date: 03/20/2024 Room Number: 329

Fiscal Implications: N/A.

Department Testimony: The Department of Health (department) Office of Medical Cannabis Control and Regulation (OMCCR) OPPOSES SB2461 SD2 HD1 which proposes amendments to Section 329D-6, HRS, and Section 329D-l0, HRS, and respectfully requests that the legislature defer this measure.

OMCCR OPPOSES the proposed amendment to section 329D-6 which removes the department's discretion to determine whether a dispensary-to-dispensary sale is necessary to ensure that qualifying patients have continuous access to cannabis for medical use. It should be noted that dispensary to dispensary sales have been in effect since July of 2023 and that a total of thirteen sales have been completed. A stated purpose of Act 309 SLH 2022 was to "amend the circumstances under which medical cannabis may be transported by and between dispensaries." In testifying on HB2260 during the 2022 legislative session, OMCCR asked that criteria on sales and transportation be in rules rather than codified in statute to allow OMCCR to maintain adequate oversight over these transactions. OMCCR maintains that this oversight is necessary because cannabis remains federally illegal. Many of these transactions require transport of cannabis and manufactured cannabis products from one island to another in contravention of federal law, thus it remains the state's responsibility to regulate the medical cannabis dispensary system adequately and effectively. OMCCR OPPOSES the proposed amendment to Section

329D-6 as it will remove any discretion that OMCCR has in regulating dispensary-to-dispensary sales.

OMCCR also OPPOSES the amendment to section 329D-10 subsection (d) to require the adoption of rules no later than nine months after a product is permitted to be manufactured and distributed pursuant to subsection 329D-10(a). Specifying a time limit for rulemaking imposes an undue burden on OMCCR and removes OMCCR's ability to properly prioritize its activities. The OMCCR Medical Cannabis Dispensary Licensing Section (MCDLS) is currently staffed only by a Section Supervisor, an Office Assistant, and five (5) Surveyors. MCDLS is responsible for oversight of dispensary operations and medicinal cannabis products, cannabis testing, and since May 2023, hemp processor registration and regulation of hemp-cannabinoid consumer products. In addition to revising administrative rules, these duties include inspecting 37 licensed facilities, reviewing product manufacturing and packaging, ensuring compliance with laboratory testing, inventory tracking, and security requirements, investigating patient complaints, and responding to public and industry inquiries and open records requests. OMCCR OPPOSES the proposed amendment to section 329D-10 subsection (d) as imposing a strict time limit on rulemaking could force MCDLS to prioritize rulemaking over activities that protect the health and safety of patients and the public.

Thank you for the opportunity to testify.

Offered Amendments: None

To: Representative Della Au Belatti, Chair
Representative Jenna Takenouchi, Vice-Chair
Members of the Health & Homelessness Committee

r: TY Cheng, Chairman, Hawaii Cannabis Industry Association

Re: Testimony **In SUPPORT** of **Senate Bill (SB) 2461 SD2 HD1**

RELATING TO MEDICAL CANNABIS.
Specifically authorizes a medical cannabis dispensary to purchase cannabis and manufactured cannabis products from another dispensary. Requires the Department of Health to adopt rules regarding medical cannabis products within a certain time. Effective 7/1/3000. (HD1)

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

The Hawaii Cannabis Industry Association (HICIA) is an industry group representing medical cannabis dispensary licensee interests in Hawaii. HICIA **SUPPORTS SB2461 SD2 HD1** as this bill may affect the medical cannabis dispensary program by expediting wholesale transactions between existing medical cannabis dispensary licensees and allowing the sale of cannabis products (i.e. prerolls) previously approved by legislators.

The Department of Health (the "DOH") has been reluctant to support the medical cannabis program. The DOH did not implement rules in accordance with the legislative wishes of lawmakers and previously passed laws. Instead, the DOH has either implemented rules which are not within the spirit of the law (i.e. requiring conditions on when and why a wholesale transaction between licenses may occur); or have wholly disregarded newly passed laws (i.e. leaving out rules on allowing cannabis preroll sales and allowing members of the public to enter a dispensary lobby when assisting a disabled 329 patient). HB1952 addresses the glaring unilateral additions and omissions by requiring the DOH to issue rules in a timely manner. In a previous House testimony on this companion bill (HB1952), the DOH admitted to an institutional culture of anti-smoking which prevented them from issuing rules to allow for the manufacture and sale of cannabis prerolls even though the legislature amended the law to allow for prerolls as a manufactured cannabis product in 2022.

There are 5 other US States with medical cannabis sales only programs that have rules that allow for the sale and manufacture of cannabis prerolls. Previously, I have provided preroll rules from medical-only markets such as Florida, Oklahoma, and South Dakota that that require lab testing of finished products in order to restrict tobacco and flavor additives. I previously provided examples of these rules to this Committee the companion bill HB1952.

The DOH is an administrator and should not pick and choose what laws to implement when such laws are duly ratified because it does not agree with the policies of the legislative branch.

Thank you for the opportunity to testify. I am available over Zoom for any questions.

Aloha,

TY Cheng

SB-2461-HD-1
Submitted on: 3/18/2024 4:53:33 PM
Testimony for HLT on 3/20/2024 10:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Ann Chung	Pono Life Maui	Support	In Person

Comments:

On behalf of Pono Life Maui, one of eight medical cannabis dispensaries licensed by the Dept of Health to provide safe, legal access to medical cannabis for Hawai‘i-registered patients, we write in SUPPORT of SB2461.

We strongly support SB 2461 that will improve the dispensary program law to resolve matters that have arisen since its passage. These amendments will allow dispensary to dispensary sales to move forward and allow for the sale of cannabis products (such as pre-rolled flower cannabis products) approved by the Legislature by putting a timeline on rulemaking.

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TESTIMONY ON SENATE BILL 2461 SD2 HD1
RELATING TO MEDICAL CANNABIS
By
Clifton Otto, MD

House Committee on Heath & Homelessness
Representative Della Au Belatti, Chair
Representative Jenna Takenouchi, Vice Chair

Wednesday, March 20, 2024; 10:00 AM
State Capitol, Room 329 & Videoconference

Thank you for the opportunity to provide COMMENTS on this measure.

Recommend allowing the department to maintain discretion over interisland wholesaling of cannabis and cannabis manufactured products between dispensaries because of the jurisdictional limits of the State:

SECTION 2. Section 329D-6, Hawaii Revised Statutes, is amended by amending subsection (r) to read as follows:

"(r) A dispensary may purchase cannabis and manufactured cannabis products from another dispensary. The department [~~may~~] [~~shall~~] may authorize a dispensary to purchase cannabis and manufactured cannabis products from another dispensary in a manner prescribed by the department by rules adopted pursuant to section 329D-27; provided that:

[~~(1) The purchasing dispensary establishes to the department's satisfaction that:~~

~~(A) The purchase is necessary to ensure that qualifying patients have continuous access to cannabis for medical use; or~~

~~(B) The cannabis and manufactured cannabis products are for medical, scientific, or other legitimate purposes approved by the State;~~

~~(2)~~] (1) The selling dispensary may transport no more than eight hundred ounces, or other amounts with prior approval by the department, of cannabis or manufactured cannabis products to the purchasing dispensary within a thirty-day period;

[~~(3)~~] (2) The cannabis and manufactured cannabis products are transported between the dispensaries for medical[~~,~~] sales, scientific[~~,~~] use, or other legitimate purposes approved by the State; and

[~~(4)~~] (3) Nothing in this subsection shall relieve any dispensary of its responsibilities and obligations under this chapter and chapter 329 with the understanding that state law and its protections do not apply outside of the jurisdictional limits of the State."

Recommend allowing dispensaries to sell dry herb vaporizers, grinders, and dosing capsules to encourage safer ways of inhaling medical cannabis:

SECTION 3. Section 329D-10, Hawaii Revised Statutes, is amended as follows:

"(a) The types of medical cannabis products that a dispensary may [~~be manufactured and distributed~~] manufacture and distribute pursuant to this chapter shall be limited to:

(1) Capsules;

(2) Lozenges;

(3) Pills;

(4) Oils and oil extracts;

(5) Tinctures;

(6) Ointments and skin lotions;

(7) Transdermal patches;

(8) Pre-filled and sealed containers used to aerosolize and deliver cannabis orally or by inhalation, such as an inhaler, nebulizer, or device that provides safe pulmonary administration; provided that:

(A) Containers need not be manufactured by the licensed dispensary but shall be filled with cannabis, cannabis oils, or cannabis extracts manufactured by the licensed dispensary or purchased from another dispensary pursuant to section 329D-6(r); but shall not contain nicotine, tobacco-related products, or any other non-cannabis derived products; and

(B) For devices that provide safe pulmonary administration:

(i) The heating element of the device, if any, shall be made of inert materials such as glass, ceramic, or stainless steel, and not of plastic or rubber;

(ii) The device shall be distributed solely for use with single-use, pre-filled, tamper-resistant, sealed containers that do not contain nicotine or other tobacco products;

(iii) There shall be a temperature control on the device that is regulated to prevent the combustion of cannabis oil; and

(iv) The device need not be manufactured by the licensed dispensary;

(9) Pre-rolled cannabis flower products, as specified by the department;

(10) Pre-filled commercially available dry herb vaporizers, grinders, and dosing capsules;

[~~(10)~~] (11) Edible cannabis products, as specified by the department; and

[~~(11)~~] (12) Other products as specified by the department."

SECTION 4. Section 329-1, Hawaii Revised Statutes, is amended as follows:

"Drug paraphernalia" does not include fentanyl test strips, or commercially available dry herb vaporizers, grinders, or dosing capsules sold by state-licensed dispensaries.

Recommend allowing certifying providers to decide what qualifies as a debilitating medical condition within the doctor-patient relationship, as the Governor has recommended:

SECTION 5. Section 329-121, Hawaii Revised Statutes, is amended as follows:

"Debilitating medical condition" means a medical condition for which the certifying physician or certifying advanced practice registered nurse has determined that the medical use of cannabis is appropriate.[~~:~~

~~(1) Cancer, glaucoma, lupus, epilepsy, multiple sclerosis, rheumatoid arthritis, positive status for human immunodeficiency virus, acquired immune deficiency syndrome, or the treatment of these conditions;~~

~~(2) A chronic or debilitating disease or medical condition or its treatment that produces one or more of the following:~~

~~(A) Cachexia or wasting syndrome;~~

~~(B) Severe pain;~~

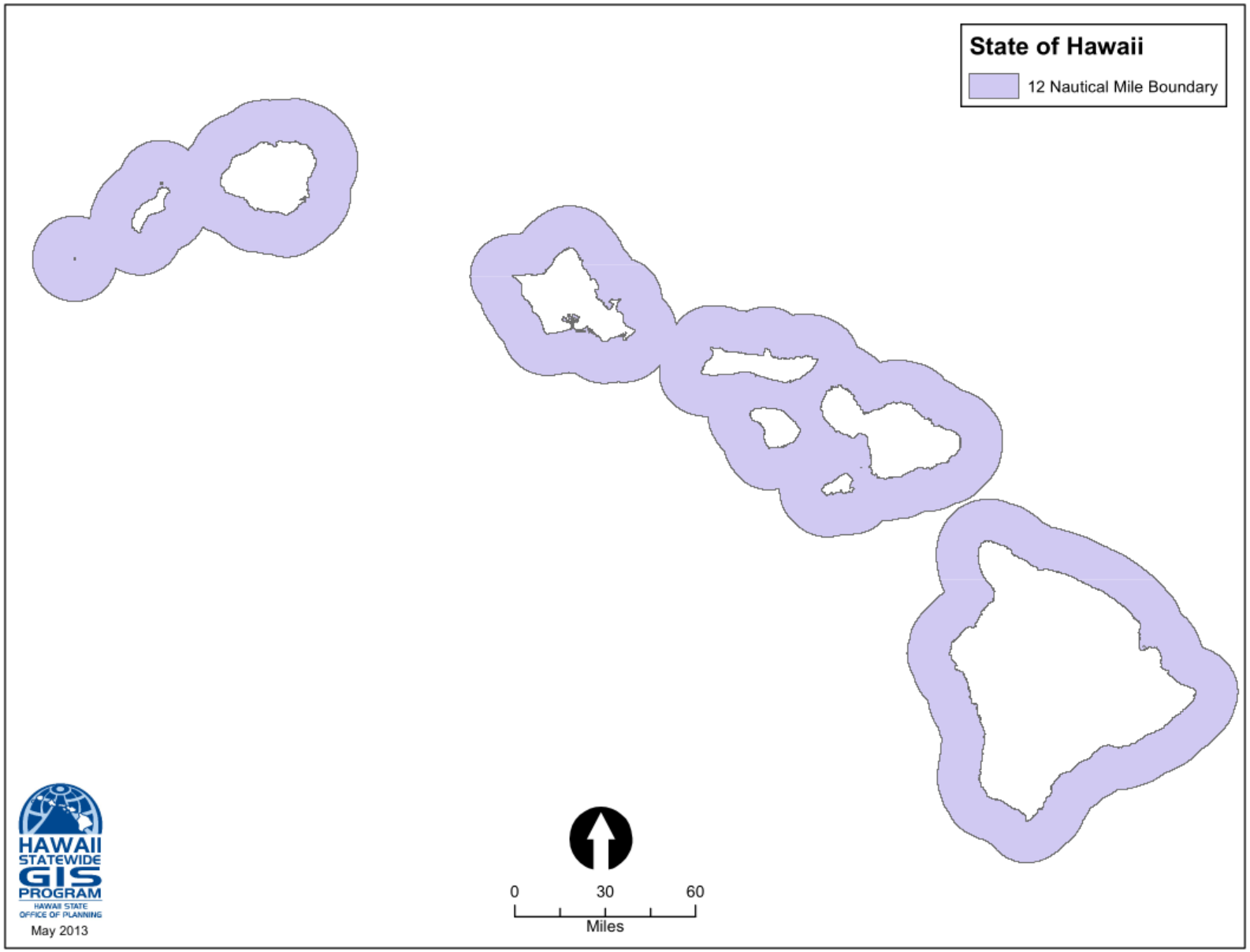
~~(C) Severe nausea;~~

~~(D) Seizures, including those characteristic of epilepsy;~~

~~(E) Severe and persistent muscle spasms, including those characteristic of multiple sclerosis or Crohn's disease; or~~

~~(F) Post-traumatic stress disorder; or~~

~~(3) Any other medical condition approved by the department of health pursuant to administrative rules in response to a request from a physician or advanced practice registered nurse or potentially qualifying patient.~~]


State of Hawaii
12 Nautical Mile Boundary
HAWAII STATEWIDE GIS PROGRAM
HAWAII STATE OFFICE OF PLANNING
May 2013
0
30
60
Miles

SanHi
GOVERNMENT STRATEGIES
A LIMITED LIABILITY LAW PARTNERSHIP

DATE: March 19, 2024

TO: Representative Della Au Belatti
Chair, Committee on Health and Homelessness

Representative Jenna Takenouchi
Vice Chair, Committee on Health and Homelessness

Submitted Via Capitol Website

FROM: Jena Matila

RE: **S.B. 2461, S.D. 2, H.D. 1 – Relating to Medical Cannabis**
Hearing Date: Wednesday, March 20, 2024 at 10:00 a.m.
Conference Room: 329

Dear Chair Belatti, Vice Chair Takenouchi, and members of the Committee:

We submit this testimony on behalf of Cure Oahu in **support** of S.B. 2461, S.D. 2, H.D. 1. Cure Oahu is a vertically integrated licensed dispensary that has been operating in the State of Hawaii since 2018, with two retail locations in the Kapahulu and Kapolei areas.

S.B. 2461, S.D. 2, H.D. 1, amends the dispensary program law to resolve matters that have arisen since the passage of Act 309 (SLH 2022) and Act 108 (SLH 2023). Specifically, the bill seeks to allow dispensary to dispensary sales to move forward and allow for the sale of cannabis products approved by the Legislature by putting a timeline on rulemaking.

Despite the legislative intent of Acts 309 and 108 to allow wholesale between dispensaries more freely, wholesale currently occurs on an emergency basis with an under 30 days request and approval process, or on a prove of need basis requiring over 30 days request and approval process. Current rules also give the Department of Health full discretion to reject requests with no specific timeline to respond. This limited wholesale approach impairs dispensaries' ability to do future planning, share manufacturing capabilities or specialize in equipment or products without facing significant risk of potential wholesale request rejections. Wholesale expands patient access to a variety of formulations, products and strains without sacrificing safety and consistency, and should be more widely supported. On a related matter, the sale of pre-rolled cannabis flower products was authorized under Act 108, but the Department has not engaged in rulemaking for the product since the law's passage. As a result, patients do not have access to this option. S.B. 2461, S.D.2, H.D. 1, would address these issues by explicitly stating a dispensary may purchase

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cannabis and manufactured cannabis products from another dispensary, and placing a time limit on rulemaking to allow distribution of products in a timely manner.

Thank you for the opportunity to submit testimony in support of this bill.

HawaiianEthos

Date: March 18, 2024

To: Representative Della Au Belatti, Chair House Committee on Health & Homelessness
Representative Jenna Takenouchi, Vice Chair House Committee on Health & Homelessness

Fr: Noah Phillips - Hawaiian Ethos

Re: Testimony **In STRONG Support** of **House Bill (SB) 2461**

RELATING TO MEDICAL CANNABIS Specifically authorizes a medical cannabis dispensary to purchase cannabis and manufactured cannabis products from another dispensary. Requires the Department of Health to adopt rules regarding medical cannabis products within a certain time.

Dear Chair Belatti, Vice Chair Takenouchi, and Members of the Committee:

Hawaiian Ethos **supports SB2461** as an important bill for enhancement of the State's medical cannabis dispensary program. Hawaiian Ethos is a vertically integrated licensed dispensary operating in the State of Hawai'i since 2018, with three retail locations in the Hilo, Kona, and Waimea areas on the Island of Hawai'i.

We strongly support the non-discretionary ability to wholesale amongst the other medical cannabis licenses. Allowing for the wholesale of cannabis products between licensees allows providers to greatly increase the necessary product diversity that patients have access to in the licensed dispensaries of their area. As the only provider of completely solventless medical cannabis products, Hawaiian Ethos is uniquely positioned to provide these clean solventless options to patients across all of the Hawaiian islands. All medical cannabis patients' needs are different and so too are their needs for different product delivery methods and formulations of their medicine i.e. Advil, Tylenol, or Aleve. In order to create a healthy cannabis marketplace where all patients have the choice to select a product most suited to their unique medical needs, licensees must be able to more freely share in the manufacturing proficiencies of each other, as the required manufacturing of these different product types are often costly and difficult for any single company to undertake alone.

Thank you for the opportunity to testify.

Noah Phillips, on Behalf of Hawaiian Ethos

SB-2461-HD-1
Submitted on: 3/15/2024 4:37:00 PM
Testimony for HLT on 3/20/2024 10:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Andy Kagemoto	Individual	Support	Written Testimony Only

Comments:

In support. Aloha!