MEDICAL MARIJUANA PROGRAM OVERVIEW

Goals

- Provide an overview of program participants and statistics.
- Give stakeholders a better understanding of new program rules and regulations.
- Highlight pending legislation and emerging issues
- Answer Questions

Medical Marijuana in Rhode Island

- 2006 Passage of the General Laws in Chapter 21-28.6 entitled "The Edward O. Hawkins and Thomas C. Slater Medical Marijuana Act".
- 2009 Amended to allow Compassion Centers (with 99 plant limit).
- 2014 Amended to allow Cooperative Cultivations and lift Compassion Center 99 plant limit.
- 2016 Passage of Budget Article 14, creating a new regulatory framework for the entire program including new licensed and grow tags.

Who is in the program? What can they possess?

- Patients Grow with a registration from DOH. Can have up to 12 mature plants/12 immature, 2.5 oz of dried usable*
- Caregiver Grow with a registration from DOH For 1 patient can have 12 mature plants/12 immature, 2.5 oz of dried usable*
- Caregiver Grow with a registration from DOH For or 2 to 5 patients- 24 mature plants/24 immature, 5 oz of dried usable*
- Authorized Purchaser Cannot grow marijuana. Can purchase form compassion centers on behalf of patients
- Cooperative Cultivations Grow under a license issued by DBR- Groups of patients or caregivers growing together
 - Residential Cooperative Cultivation 24 mature plants/24 immature, 10 oz of dried usable*
 - Non-residential Cooperative Cultivation- 48 mature plants/48 immature, 10 oz of dried usable*

Who is in the program? What can they possess?

- Licensed Cultivators Grow under a license issued by DBR. Can only supply Compassion Centers. Possession is limited by the class of their license and by market demand.
- Compassion Centers Licensed by DBR. Possession is limited to what they can grow internally in their cultivation facility and to what they obtain from Cultivators. Sell to patients, caregivers, and authorized purchasers.

Current Program Participants

- 17,279 registered patents (35 minor patients)
- 2,713 registered caregivers
- 117 authorized purchasers
- 3 compassion centers
- 7 licensed cultivators
- 16 approved cultivator applicants
- 37 cultivator applications being evaluated and processed.

Marijuana Use in Rhode Island

Rhode Island has one of the highest use rates of any non recreational state (and some recreational states)

Rhode Island has a prolific and invasive black/grey market

Rhode Island has 7 of the top 15 highest use cities/metropolitian areas in the US

Approximately 1 in every 45 adults are in the medical marijuana program

Why So Serious?

- Program Access
- Lack of Data, Information, Checks and Balances, Verification
- Loopholes and Lack of Understanding
- Financial Incentives to Break the Law

Program Access

- Registration as a Patient = Ability to Grow
- MA and CT practitioners are allowed to recommend people into the program
 - Out of state pay to play clinics
 - Telemedicine
- Qualifying conditions can be vague and abused
- Patients can appoint anyone as a caregiver as long as they pass a BCI
 - Registration as a caregiver = Ability to grow

Lack of Data, Information, Checks and Balances, Verification

- No way to know who is growing and who isn't
- No way to know if people are growing in one location
- No way to know if people are within their limits
- No way to know how much people are using or consuming
- No real time verification

Loopholes and Lack of Understanding

- Wet Marijuana Loophole
- "No Consideration" Gifting Clause

Financial Incentives to Break the Law

- Compassion Center limit of 99 plants
- Ability for Patients and Caregivers to "sell overages" to compassion center
- Use of wet marijuana loophole
- Incentives to have large, illegal, dangerous grows
- Legal cover to supply the black market

Article 14 Reforms to address...

- Program Access
- Lack of Data, Information, Checks and Balances, Verification
- Loopholes and Lack of Understanding
- Financial Incentives to Break the Law
- Dedicated Program Resources

Dedicated Program Resources

- Dedicated DOH and DBR staff
- Restricted receipt accounts to fund program administration

Access to the Program

- All practitioners must undergo continuing education requirements
- Applications must include a copy of a relevant medical record
- Practitioners will utilize an online portal similar to the PDMP
- Patient and Caregiver registrations shortened from 2 year to 1 year term

Increased Access to Safe Medicine

- Now patients can shop at any compassion center
- Patients can appoint an authorized purchaser and a caregiver
- All medicine sold by compassion centers is now subject to testing, labeling, packaging, manufacturing and pesticide use regulations.

Removed Financial Incentives to Break the Law

- Patients and caregivers can no longer sell to Compassion Centers, replaced by licensed cultivators
- Patients and caregivers can no longer advertise "overages" for sale

Closing Loopholes, Clarifying the Law

- New limits on wet marijuana and equivalencies for dry usable
- Clarifying rules on Cooperative Cultivations, grow locations, outdoor growing

Marijuana Tracking

- All patients and caregivers must use plant tags issued by the state
- Tags and all registry cards are RFID enabled, track grow locations, plant limits, and can be scanned and verified in the field
- Seed to sale inventory tracking for cultivators and compassion centers
- Point of sale tracking for all sales to patients, caregivers and authorized purchasers

Conditions for Tag Use

- Tags must be used indoors in a secure location
- Tags must be used in a way that prevents odors from impacting the outside environment
- Tags may only be used to supply registered patients
- No tag holder may advertise for the sale of marijuana
- Tags must be in place by April 1, 2017

Licensed Growing

- Cooperative Cultivations
- Cultivators
- Compassion Centers
- ALL REQUIRE MUNICIPAL APPROVAL
- ALL ARE SUBJECT TO DBR INSPECTIONS AT ANY TIME

Why Cultivators?

- Compassion Centers cannot supply the market alone
- Diverse products means more options and less home growing
- A diverse supply means a steady supply
- More accountability, testing, labeling, and packaging

Regulations for Cultivators and Compassion Centers

- 1000 ft from any preexisting school
- Security Requirements
- Surveillance Requirements
- Sanitation Requirements
- Staff Requirements
- Inventory Tracking
- Manufacturing Requirements
- Transportation and Transaction Requirements

Regulations for Cultivators and Compassion Centers

- Odor Mitigation Requirements
- Packaging Requirements
- Labeling Requirements
- Testing Requirements
- Emergency Procedures and Standard Operating Procedures
- Record Keeping

Current Issues Facing Medical Marijuana

- Possession and grow limits
- Municipal zoning and local regulation
- Disclosure of home grows*
- Number of compassion centers*
- Black market activity and unsafe medicine

*Pending Legislation

Possession and Grow Limits

- Plants can yield anywhere from 2 oz to 2 lbs of dried usable marijuana
- Patients and caregivers often stagger their harvests and donate (or sell) overages to stay within their limits
- Prolific growers chronically over produce exceeding their patient's needs and what they can lawfully possess and contributing to the black and grey market
- Options to create greater parity between plant counts and harvested amounts include lowering plant counts or increasing limits of dried usable marijuana

Municipal Regulation of Licenses

- State zoning laws are silent on marijuana cultivation
- Some municipalities consider marijuana cultivation an acceptable use where agricultural, or manufacturing is allowed
- Some municipalities do not permit it anywhere since it is not specified in state zoning law
- Some municipalities preemptively ban it in all zones
- Some municipalities pass ordinances to allow it in specific zones or under specific restrictions and conditions such as requiring a special use permit or a variance
- DBR defers to municipalities on all zoning issues however we are also a resource when drafting new zoning ordinances

Process For Licensing and Municipal Approval

- Applications demonstrate qualifications, understanding or regulations and ability to satisfy all regulatory requirements
- All applications must contain a preliminary determination of compliance with local zoning
- Once an application is approved, the applicant has up to 9 months to satisfy all regulatory requirements and provide documentation from the municipality that confirms that marijuana cultivation is a permitted use within the designated zone
- DBR will contact the municipalities where we have applicants to coordinate our application and licensing inspections with local officials
- Having an application approved does not guarantee a license

Municipal Regulation of Non-licensed Grows (home growing)

• 45-24-37(g) Zoning Enabling Act:

"Notwithstanding any other provisions of this chapter, plant agriculture is a permitted use within all zoning districts of a municipality, including all industrial and commercial zoning districts, except where prohibited for public health or safety reasons or the protection of wildlife habitat."

- Some Municipalities Have:
 - -Banned home growing in certain zones
 - -Attempted to ban caregivers but not patients
 - -Require all home grows to be inspected and/or issued a permit
 - -Sealed the records of any permit or inspection of a home grow

Municipal Regulation of Non-licensed Grows (home growing)... disclosure of grows*

Public Safety

- Patients and caregivers can be targets for theft and other crimes
- 1 in 45 adults in Rhode Island are cardholders Privacy and Record Keeping
- All patient and caregiver information is private and protected under HIPAA
- 21-28.6-6(k) "It shall be a crime, punishable by up to one hundred eighty (180) days in jail and a
 one thousand dollar (\$1,000) fine, for any person, including an employee or official of the
 department departments of health, business regulation, public safety, or another state agency or
 local government, to breach the confidentiality of information obtained pursuant to this chapter."

Enforcement

 Patients and caregivers are not subject to arrest, search, or prosecution solely because they are in the program.

Compassion Center Data

- Approximately 2000 patients in 2009 when three compassion centers were authorized through statute.
- Allowing patients to shop at all three compassion centers in 2016 made medicine more accessible increasing sales and lowering prices.
- Three compassion centers currently grow approximately 3,500 plants, licensed cultivators grow 500 plants, patients and caregivers collectively have ordered tags to grow over 42,000 plants.
- Compassion centers can now offer home delivery.
- Compassion centers can now diversify products by utilizing licensed cultivators.

Rhode Island vs. Other States with Comparable Dispensaries

State	Maximum Dispensaries	Patients	Patients per Dispensary
Rhode Island	3	17,279	5,759
Delaware	3	1,752	584
New Hampshire	4	1,300	325
Vermont	4	3,391	848
Washington DC	5	3,948	790
Hawaii	5	15,334	3,067
New Jersey	6	6,527	1,088

Rhode Island vs. Other States with Comparable Patient Population

State	Maximum Dispensaries	Patients	Patients per Dispensary
Rhode Island	3	17,191	5,759
Hawaii	5	15,334	3,067
Connecticut	9	16,566	1,841
Nevada	66	20,773	315
Illinois	60	15,900	265

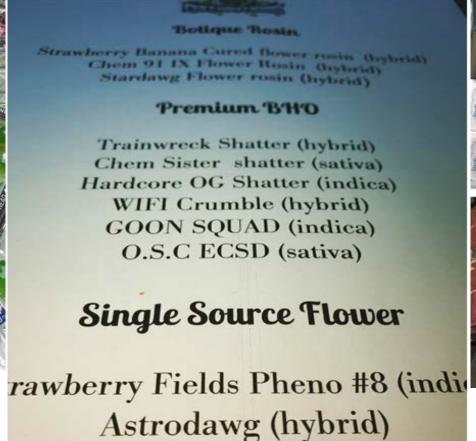
National Average of Patients per Dispensary: 1,395 (4,364 less than in RI)

Black and Grey Market



Despite new regulations statute continues to provide cover for a large black and grey market that is very difficult to regulate





Chem 91 IX (hybrid)























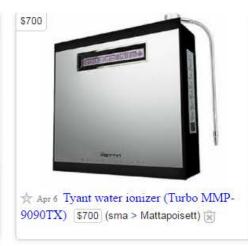




Apr 16 Dab shatter mmp (sma > Warwick)











☆ Mar 21 MMP MMC ONLY Making rso bho and shatter butter (sma) ₪







☆ Apr 19 mmp/mmc Clean Oil \$1 (bos > Ma/Rl) 🕱



☆ Apr 19 mmp/mmc Clean Oil \$1 (bos > Ma/RI) ເ

★ Top shelf mmp mmc - \$200 (Richmond RI)

image 1 of 2



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Who would be interested in renting Kitchen space from me nightly? fully modern kitchen. can handle anything. lets talk



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17 Comments 372 Views





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