Vermont Medicinal Cannabis Sub-Committee Meeting Minutes—September 9, 2021

Tom Nolasco calls to order meeting at 4 pm ET.

Attendees

Advisory Committee Members:

- Jim Romanoff
- Meg D'Elia

VT Cannabis Board:

- Chair Pepper

NACB:

- Tom Nolasco
- Dr. Mary Clifton

Minutes recorded by Meggan Hau.

Tom Nolasco, from National Association of Cannabis Businesses (NACB), made introductions to Advisory Committee members. Dr. Mary Clifton, from CBDandCannabisInfo.com, will also be heading this subcommittee and introduced themselves.

Introductions were made by Advisory Committee members: Jim Romanoff & Meg D'Elia

Public Comments were noted. Members of the Vermont public were notified how to submit comments via the CCB website. It was noted that the attending public will be allowed to comment during the last ten minutes of this Public Health meeting. The CCB will also hear public comments during their Friday meetings.

The Sub-Committee moves on to discuss the purpose of the Medicinal Subcommittee and reviews the areas to get agreement on. When adult-use comes online, it ensures the medical cannabis community and patients have continued care and service and are not marginalized in any way. Supply issues and ideas to protect patient access to products they need.

Notable comment(s):

*Meg D'Elia- First priority is access. Without a large enough program, it will be difficult to maintain the current medical program. Make it known, not more restrictive than adult-use and reducing hoops to jump through.

*Jim Romanoff- Agree about access. There is a lot of concern that in the rush to the adult-use market and money that can be made, medical programs will suffer. Along with access, adults can go to adult-use products if they're cheaper, ensuring the program itself is comparable to what is available in other states in terms of product variety, testing, etc. Access (reciprocity), program improving itself (products availability testing).

The NACB Sub-Committee moderator Tom Nolasco posed questions to subcommittee members to share considerations for supply and demand and how it might be affected going forward. And with expansion of adult-use customers, will that spurn the supply side because of a greater number of cultivators?

Notable comment(s):

- *Jim Romanoff- supply has always been limited in Vermont. 2019 report- it outlines points really specifically that speak to access and other issues like cost, geographical considerations, etc.
- *Meg D'Elia- Right now the program is small, economically it's hard to grow more strains when patient base has decreased. With Covid, we are seeing quite a delay in the supply chain of other materials that impacts final products going to dispensaries.
- *Jim Romanoff- medical patient is not a typical cannabis consumer.
- *Dr. Clifton- We should continue to carve a space for concentrates for medical patients.
- *Given the limited number of dispensaries and patients, it wouldn't be that difficult to determine data. Dispensaries have information on products that are more important to patients vs not. Work with dispensaries to determine predominantly desirable strains.

Subcommittee member Meg D'Elia spoke on qualifying conditions being determined by state but suggests health care providers be allowed to provide input to determine what is or is not qualifying. Dr. Clifton with her experience agrees. We should try to develop a more expansive and inclusive list that is not currently included in current qualifying conditions in Vermont that we can support with what other states are doing.

Tom Nolasco brought up potency issues and caps, and the subcommittee members shared their opinions. Jim Romanoff shared that putting caps will make it less effective and would not be good for patients. Dr. Clifton detailed the idea of a THC waiver in Iowa, agreed it's another unnecessary hoop for patients unless state THC levels in dispensaries are being kept low. Meg D'Elia said it could be very limiting to patients if we put a cap, it would be detrimental to patients.

Dr. Clifton addressed concerns that patients have expressed home grow options as they have more availability through dispensaries, and there is a need to figure out a mechanism to keep cost low. It's hard for patients to get to dispensaries and medical market products are expensive.

Other issues to include? Meg D'Elia- in alignment with access, advocating for increasing patient limits as getting to dispensaries is difficult for patients. In order to support program, we need reciprocity and testing.

Suggested next steps:

Tom Nolasco will send Market Structure analysis report to subcommittee members.

Meg D'Elia will find supporting language around qualifying conditions.

Jim Romanoff will share his 2019 report.

Jim Romanoff and Meg D'Elia will reach out to dispensary clients to get data to formulate baseline.

Public Comment Period:

Tom Nolasco opened the floor for public comment at 4:45 PM and reminded members of the public that they can submit comment via in the room (if in attendance) or can submit in writing to: https://ccb.vermont.gov/form/publicinputform

- Geoffrey Pizzutillo from VT Growers Association- He is as a caregiver. Want to speak to Vermonters to sustain themselves in home grow. Encourage to look at Maine program. He will share information.

Adjournment:

Following closing thoughts/comments, Tom Nolasco asked for a motion to adjourn. Subcommittee member Dr. Clifton seconds. Meeting is adjourned at 5 pm.

Next Medicinal Sub-Committee meeting is Monday, September 13 at 4 pm ET.