Vermont Medicinal Cannabis Sub-Committee Meeting Minutes—September 13, 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 makes a motion to approve minutes from Thursday. Meg D'Elia makes motion to approve. Jim Romanoff seconds.

Public Comments were noted and reviewed by subcommittee. Everyone had opportunity to review.

The Sub-Committee moves on to discuss the recommendations from Marijuana for Symptom Relief Oversight Committee Report 2019 and discuss suggestions around laboratory testing, possession limits, patient can visit any dispensary, exempt cannabis cards from in person exam, advertising, reciprocity.

## Notable comment(s):

- \*Meg D'Elia- Regarding possession, we asked to increase to 3 ounces per month based on anecdotal evidence. Overall recommended patient possession limit aligned with that of adult use. If that is not the case with adult use, we ask to reconsider.
- \*James Pepper- Current possession limit (30 days 2 ounces) is a purchase cap. That needs to go away. Two ounces under criminal law is what triggers a penalty. What I would think is that one time purchase limit should either track what is happening in adult-use or up to 2 ounces or an exception with medical patients. Allowed to possession unlimited amounts in your home even if you are not on medical program. Either limit at 2 ounces or discuss a 90-day supply- exception to penalties. We could also discuss comparable. What does 2 ounces convert to, if we want to go down that route.
- \*Jim Romanoff- The limit is in part because of what you can transport from dispensary to your home. Plant amount is a separate issue. The Oversight Board recommended we increase limit to at least to adult use.
- \*Dr. Clifton- 90-day supply as deemed appropriate by pharmacist or doctor. Limit of 3 ounces OR a 90 day supply as deemed appropriate by pharmacist or doctor. Could help with the grey area with concentrates.
- \*Meg D'Elia- Think I would lean to align this toward adult-use for simplification of this. make sure medical patients are not more restricted than adult use.
- \*Jim Romanoff- Are all dispensaries going to carry the correct medicinal products?

- \*Dr. Clifton- Use terms of incurable, chronic or terminal conditions. Discontinue 3 month relationship requirement.
- \*James Pepper- direction is giving physicians more autonomy. Could it be no more than once a year but at discretion of the doctor? Waive the annual verification that way we avoid defining what chronic means? Physicians want more directive than less.
- \*Meg D'Elia- Focus is making people aware we have program but educating health care professionals, having it come from the state would be critical and providing educational resources.
- \*Meg D'Elia- Rather than an expansive list of qualifying conditions, we could allow health care providers to make that determination. Physician verifies that the patient could benefit from cannabis.

Suggested next steps:

Meg D'Elia -send language

**Public Comment Period:** 

James Pepper noted there were no public comments in the room.

Tom Nolasco proposed putting these topics on the agenda for Thursday: fingerprinting for caregivers, buffer zones, and question on limits for how many can be served in a dispensary at a time.

Meeting is ended at 5 pm.

Next Medicinal Sub-Committee meeting is Thursday, September 16 at 4 pm ET.