

DEPARTMENT OF THE PROSECUTING ATTORNEY
CITY AND COUNTY OF HONOLULU

ALII PLACE
1060 RICHARDS STREET • HONOLULU, HAWAII 96813
PHONE: (808) 547-7400 • FAX: (808) 547-7515

KEITH M. KANESHIRO
PROSECUTING ATTORNEY



ARMINA A. CHING
FIRST DEPUTY PROSECUTING ATTORNEY

THE HONORABLE ANGUS L.K. MCKELVEY, CHAIR
HOUSE COMMITTEE ON CONSUMER PROTECTION & COMMERCE
Twenty-Eighth State Legislature
Regular Session of 2015
State of Hawai'i

February 18, 2014

RE: H.B. 1455; RELATING TO MEDICAL MARIJUANA.

Chair McKelvey, Vice Chair Woodson and members of the House Committee on Consumer Protection & Commerce, the Department of the Prosecuting Attorney of the City and County of Honolulu ("Department") submits the following testimony in opposition of House Bill 1455, H.D. 1.

Currently, pursuant to section 329-121, H.R.S., the Adequate Supply for a Qualifying Patient or Primary Caregiver cannot exceed seven marijuana plants, whether immature or mature, and four ounces of usable marijuana at any given time. H.B. 1455, H.D. 1 would allow up to 14 marijuana plants at a single property defined by a tax map key number. Each primary caregiver shall be responsible for the care of no more than 3 qualifying patients. Upon establishment of a medical marijuana dispensary, each primary caregiver shall be responsible for the care of no more than 1 qualifying patient.

For the time being, the amount of marijuana plants cultivated should not be increased. Should there be an establishment of a medical marijuana dispensary, there should be no cultivating of marijuana by primary caregivers or qualified patients in order to attain accurate tracking and prevent leakage of medical marijuana into the black market.

For the above mentioned reasons, the Department of the Prosecuting Attorney opposes the passage of H.B. 1455, H.D. 1. Thank you for the opportunity to testify on this matter.



Hawaii's voice for sensible, compassionate, and just drug policy

COMMITTEE ON CONSUMER PROTECTION & COMMERCE

Rep. Angus L.K. McKelvey, Chair

Rep. Justin H. Woodson, Vice Chair

Wednesday, February 18, 2015

3:00pm

Conference Room 325

State Capitol

415 South Beretania Street

Executive Director Rafael Kennedy with Comments - HB 1455 HD1- Relating to Medical Marijuana

Aloha Chair McKelvey, Vice Chair Woodson, and members of the committee,

The Drug Policy Forum of Hawaii strongly supported the original draft of HB1455, and we still **support the intent**. The original bill did many useful things that have been removed, and we understand the reasons for those changes. We are even sympathetic to the rationale behind introducing a sunset on the increase in the number of patients per caregiver, but any good that would have been done by the bill is undone by the provision requiring that **no more than 14 plants be grown on any one tax map key**.

The bill allows for caregivers to provide for up to three patients, but also states that they may grow no more than 14 plants on one property. This means, in effect, that they can provide for a maximum of two patients. Many caregivers are patients themselves, which is why they have invested in the equipment and training required to grow medical cannabis effectively. These patient-caregivers will not be allowed to take on any new patients.

Furthermore, a relatively common practice in the state is for families to grow together. A husband and wife, for instance can each become caregivers. This provision will prohibit them from doing so. The fact is that one of the primary reasons it is so difficult for patients to find caregivers, or to grow themselves is that it is difficult to find a place to do so, especially on

Oahu. There is no valid justification for this limitation from either a health or consumer safety perspective. Changes in the administrative rules have made enforcement of caregivers with multiple plants easier, by requiring that each plant be tagged with the qualifying patient's information. Enforcement is therefore not a compelling reason to impose these limitations.

In its current form, the bill will do more harm to the medical cannabis patient population than good, and so we cannot support it. If it is amended to remove this limit, or dramatically increase it, we would support the bill.

Mahalo for your consideration on this important matter, and for the opportunity to testify.

Rafael Kennedy
Executive Director,
Drug Policy Forum of Hawaii

The Drug Policy Forum of Hawaii works to educate policymakers and the public about effective ways of addressing drug issues in Hawai'i with sensible and humane policies that reduce harm, expand treatment options, and adopt evidence-based practices while optimizing the use of scarce resources.

From: mailinglist@capitol.hawaii.gov
Sent: Monday, February 16, 2015 12:14 PM
To: CPCtestimony
Cc: hawaicannabiscare@gmail.com
Subject: Submitted testimony for HB1455 on Feb 18, 2015 15:00PM

HB1455

Submitted on: 2/16/2015

Testimony for CPC on Feb 18, 2015 15:00PM in Conference Room 325

Submitted By	Organization	Testifier Position	Present at Hearing
Hawaii Cannabis Care	Hawaii Cannabis Care	Comments Only	Yes

Comments: Aloha, the original bill 1455 was supportable but with all the new added changes its not. We can help more patients but only allow 14 plants on a premises. Makes no sense. We need to help change this broken system of access to a better system. Not the same or worse. Please understand that this plant is a real medicine to many people in Hawaii. Not everyone is just getting high. We have children, seniors and young people who don't want to use pharmaceuticals but can either use heated or unheated forms of cannabis to aid them in relief. Please help us change this system to one that is worth calling our own. It's time to help our patients not control them.. Mahalo

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov



The Public Policy Voice for the Roman Catholic Church in the State of Hawaii

HEARING: House Committee(s) on CPC, hearing on February 18, 2015 @ 3:00.p.m. #325

SUBMITTED: February 16, 2015

TO: House Committee on Consumer Protection & Commerce
Rep. Angus McKelvey, Chair
Rep. Justin Woodson, Vice Chair

FROM: Walter Yoshimitsu, Executive Director

RE: Serious Reservations on HB 1455 HD1 Relating to Medical Marijuana

If passed, this bill would allegedly “fix” the problem of medical marijuana distribution and the need for dispensaries and/or regulation. **We understand that medicinal marijuana is already legal in the State of Hawaii.; however, we maintain that promoting the use of marijuana (even for medical reasons) will translate for many, especially young people, as permissiveness, with little or no consideration of its ultimate effect on one’s body.** According to the American Medical Association, marijuana is considered a “dangerous drug” and a “powerful intoxicant” that harms one’s mental, physical, academic, and spiritual well-being, promotes irresponsible sexual behavior, encourages disrespect for traditional values, and threatens Hawaii’s youth. This is not what we want for Hawaii’s keiki.

At the federal level, marijuana remains classified as a Schedule I substance under the Controlled Substances Act, where Schedule I substances are considered to have a high potential for dependency, making distribution of marijuana a federal offense.

Many prescribing physicians for medicinal use of marijuana are arbitrary as to what counts as an authentic medical need so there is no real way for this legislature to make a truly informed decision. Even the American Medical Association’s 527-member House of Delegates decided during its interim meeting in 2013 (National Harbor, Md.), to retain the long-standing position that “cannabis is a dangerous drug and as such is a public health concern.”

Long-term health effects of chronic use, and marijuana’s role as a gateway to the use of other illegal drugs, are serious issues surrounding its use and decriminalization. The Catholic Church cares too much about the family to support this endeavor. Priority legislation should include efforts that strengthen and promote the family, not provide tools to ultimately destroy it.

The Catechism offers useful guidance: “The use of drugs inflicts very grave damage on human health and life” (no. 2291). In 2001, the Vatican’s Pontifical Council for Health Care Ministry issued a pastoral handbook entitled “Church, Drugs, and Drug Addiction.” It extols the virtue of temperance which “disposes us to avoid every kind of excess: the abuse of food, alcohol, tobacco, or medicine” (no. 2290).

Mahalo for the opportunity to submit these comments.



ONLINE TESTIMONY SUBMITTAL
House Committee on Consumer Protection & Commerce
Hearing on Wednesday, February 18, 2015 @ 3:00 p.m.
Conference Room #325

DATE: February 16, 2015

TO: House Committee on Consumer Protection & Commerce
Rep. Angus McKelvey, Chair
Rep. Justin Woodson, Vice Chair

FROM: Eva Andrade, Executive Director

RE: Serious Reservations HB 1455 HD 1 Relating to Medical Marijuana

Aloha and thank you for the opportunity to provide comments on medical marijuana and why we have serious concerns about the issue. Hawaii Family Forum is a non-profit, pro-family education organization committed to preserving and strengthening families in Hawaii, representing a network of various Christian Churches and denominations. While we have compassion for people who are ill and are staunch supporters of providing better end of life care for people who are in pain and suffering, we have serious concerns about the expansion of access to medical marijuana and their potential ramifications on the wider community – especially with regards to our keiki.

Although we will leave the discussion as to the regulatory functions and applicability to the legal experts, we do offer these five reasons why we are concerned:

- 1) Marijuana use, cultivation and dispensing goes against federal law.**
Although 23 states (and D.C.) have enacted laws to legalize medical marijuana, (including Hawai'i which legalized it for medicinal use in 2000)ⁱ, the bottom line remains that **it is still illegal to possess, use or distribute marijuana according to federal law.**
- 2) Expanded access to marijuana will hurt our keiki.**
Once the bridge is built to widen its access and availability, our keiki will be caught in the crossfire. There's a reason marijuana is the most widely used illegal drug in the world – it becomes an addiction. The bottom line is that people can't stop using it once they startⁱⁱ. And once they start, it can become a pathway to other drugs. Even though proponents have tried to dismiss this argument, clinical studies continue to prove otherwise. Medical marijuana use can also hurt a child during his or her mother's pregnancy.ⁱⁱⁱ
- 3) Medical marijuana opens the door for passage of recreational use of marijuana.**
The argument for medical marijuana usually is just a way of opening the door to the recreational use of marijuana. When a state legalizes smoking marijuana for medical purposes, you can expect the next push to be for legalizing recreational marijuana. People of faith may accept the use of drugs for medicinal necessity but we do not understand why we need to flip to the other extreme and treat marijuana like it's a mild, over-the-counter medication. Even the American Medical



Association maintains its position that it [AMA] “shall encourage model legislation that would require placing the following warning on all cannabis products not approved by the U.S. Food and Drug Administration: “Marijuana has a high potential for abuse. It has no scientifically proven, currently accepted medical use for preventing or treating any disease process in the United States.” (Res 213, I-14) ^{iv}

4) Benefit of smoking marijuana for medical purposes still not proven

The fact remains that there is not enough scientific data to support marijuana’s medical benefits. According to the Whitehouse website, Whitehouse.gov^v, “To date...neither the FDA^{vi} nor the Institute of Medicine have found *smoked* marijuana to meet the modern standard for safe or effective medicine for any condition.” It’s highly unlikely that anyone will be able to prove the substance is entirely safe, because science shows that it is not. As with all drugs, there is always a long list of side effects, warnings, and disclaimers.

5) Hawai’i’s roads could become a testing ground for legal limits

Marijuana use affects driving. It is the most prevalent illegal drug detected in impaired drivers, fatally injured drivers and motor vehicle crash victims. It is not difficult to conclude that drivers who test positive for marijuana can cause serious automobile accidents. Five years after establishing a “medical” marijuana program, California saw an increase in fatal crashes. The California Office of Traffic Safety (OTS) completed a survey in 2012 that reported more drivers tested positive for drugs that can impair driving (14%) than did for alcohol (7.3%). Of the drugs, marijuana was most prevalent at 7.4%.^{vii} According to the Colorado Department of Transportation, drivers testing positive for marijuana doubled between 2006-2010, following an influx of pot shops and significant increases in registered “medical” marijuana users.^{viii}

Hawaii needs to remain a safe place for families. We hope that you keep these things in mind and not rush into anything until all the problems reported around the country with respect to marijuana are worked out. Mahalo for the opportunity to submit our concerns.

ⁱ Senate Bill 862 passed in 2000, (VOTE IN THE HOUSE: 30 yes-and 20 no (Auwae, Cachola, Halford, Kanoho, Kawakami, Lee, Leong, Marumoto, McDermott, Menor, Meyer, Morihara, Moses, Nakasone, Pendleton, Rath, Stegmaier, Takai, Whalen, Yonamine); (VOTE IN THE SENATE) 15 yes-and 10 no (Buen, Chun, D. Ige, M. Ige, Inouye, Iwase, Kawamoto, Matsuura, Sakamoto, Tam) [Source:

http://www.capitol.hawaii.gov/session2000/status/SB862_his_.htm

ⁱⁱ <http://www.drugabuse.gov/publications/drugfacts/marijuana> (02/05/15)

ⁱⁱⁱ <http://www.livescience.com/42853-marijuana-during-pregnancy-baby-brain.html> (02/05/15)

^{iv} AMA Policy: D-95.976 Cannabis - Expanded AMA Advocacy #4

^v <https://petitions.whitehouse.gov/response/what-we-have-say-about-legalizing-marijuana> (02/05/15)

^{vi} “A growing number of states have passed voter referenda (or legislative actions) making smoked marijuana available for a variety of medical conditions upon a doctor’s recommendation. These measures are inconsistent with efforts to ensure that medications undergo the rigorous scientific scrutiny of the FDA approval process and are proven safe and effective under the standards of the FD&C Act. Accordingly, FDA, as the federal agency responsible for reviewing the safety and efficacy of drugs, DEA as the federal agency charged with enforcing the CSA, and the Office of National Drug Control Policy, as the federal coordinator of drug control policy, do not support the use of smoked marijuana for medical purposes.” [Source: <http://www.fda.gov/NewsEvents/Newsroom/PressAnnouncements/2006/ucm108643.htm>]

^{vii} http://unmaskingmarijuana.org/Public_Safety.html (February 6, 2015)

^{viii} <http://kdvr.com/2014/05/15/study-more-marijuana-positive-drivers-involved-in-fatal-car-accidents-in-colorado/>



Hawaii's Voice for Sensible, Compassionate, and Just Drug Policy

TO: HOUSE COMMITTEE ON CONSUMER PROTECTION & COMMERCE

FROM: PAMELA LICHTY, M.P.H., PRESIDENT

DATE: FEBRUARY 18, 2015, 3:00 p.m., ROOM 325

RE: H.B. 1455, H.D. 1, RELATING TO MEDICAL MARIJUANA –
COMMENTS

Good afternoon, Chair McKelvey, Vice Chair Woodson, and members of the Committee. My name is Pam Lichty and I'm President of the Drug Policy Action Group (DPAG), the government affairs arm of the Drug Policy Forum of Hawaii.

While we support the intent of this measure and strongly supported H.B. 1455, I'm afraid we cannot support the language of the H.D. 1 on the agenda today.

The original bill made many adjustments to Hawaii's 15-year-old medical marijuana program which would have greatly improved its usefulness for the more than 13,000 patients and 1,600 caregivers who are registered with DOH.

The House draft 1, however, has eliminated most of those provisions which included permitting transfer of plants among patients and caregivers and has deleted the provision increasing the amount of allowable cannabis (which is desirable for the many modes of ingestion that require more product than does smoking – the least healthy mode of use.)

The draft reduces to three (from five) the number of patients that one caregiver could assist. This in itself is not problematic since it is an improvement from the current 1:1, nor do we object to the sunset clause which would cause this formula to revert to 1:1 once dispensaries are up and running.

However, we do object the provision that no more than 14 plants can be grown at a single location. While this may seem to be a lot of plants, there are many scenarios where this would not suffice. An example would be a caregiver, who is a patient herself while growing for a husband and wife. If the caregiver were an

apartment dweller for example, this would necessitate growing for all three registered patients at the same site.

Moreover the proposed administrative rules for DOH (soon to be finalized) require each plant to be tagged with the qualifying patient's information. This requirement would make it very simple indeed for law enforcement to understand for whom it was being grown and eliminate any question of why multiple plants are being grown in one place.

If this issue is addressed, we would support the measure. If this restriction is retained, we cannot support the language of H.B. 1455 , H.D. 1 since we think it would not be of any help to patients.

Mahalo for the opportunity to testify today.

From: mailinglist@capitol.hawaii.gov
Sent: Sunday, February 15, 2015 2:07 PM
To: CPCtestimony
Cc: bacher.robert@gmail.com
Subject: Submitted testimony for HB1455 on Feb 18, 2015 15:00PM

HB1455

Submitted on: 2/15/2015

Testimony for CPC on Feb 18, 2015 15:00PM in Conference Room 325

Submitted By	Organization	Testifier Position	Present at Hearing
Robert Bacher	Green Futures	Comments Only	No

Comments: I support the idea of giving patients safe access to their medicine, but "allowing" a caregiver to help more patients, while further restricting the number of plants to the amount for only 2 patients seems to do the opposite. Please help patients this year.

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

From: mailinglist@capitol.hawaii.gov
Sent: Tuesday, February 17, 2015 1:27 PM
To: CPCtestimony
Cc: alternativepainmanagementclub@gmail.com
Subject: Submitted testimony for HB1455 on Feb 18, 2015 15:00PM

HB1455

Submitted on: 2/17/2015

Testimony for CPC on Feb 18, 2015 15:00PM in Conference Room 325

Submitted By	Organization	Testifier Position	Present at Hearing
Mike Ruggles	Alternative Pain Management Pu`uhonua LLC	Oppose	No

Comments: I do not support HB 1455. I did support the original version, however it has been grossly perverted at this point. This bill has become self contradictory. To say that only 14 plants can be grown per TMK number is outrageous and will be problematic for people living together. For example, a household having three medical cannabis patients living on the same property, would be adversely effected by this bill. This bill would prevent people who have a green thumb from acting as a patient's caregiver in many circumstances and would limit access to medicine rather than improve it. Additionally, to say that a caregiver shall be responsible for no more than three qualifying patients means that they could potentially be responsible for 21 plants. If they themselves are also a patient the number would rise to 28 plants. How is this possible if no TMK number can have more than 14 plants grown on it? Furthermore, to propose this act take effect in 2050 is outright insulting to the medical cannabis community.

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

woodson2-Rachel

From: mailinglist@capitol.hawaii.gov
Sent: Monday, February 16, 2015 12:55 PM
To: CPCtestimony
Cc: anny@me.com
Subject: *Submitted testimony for HB1455 on Feb 18, 2015 15:00PM*

HB1455

Submitted on: 2/16/2015

Testimony for CPC on Feb 18, 2015 15:00PM in Conference Room 325

Submitted By	Organization	Testifier Position	Present at Hearing
Ann Turner	Individual	Oppose	No

Comments:

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

From: mailinglist@capitol.hawaii.gov
Sent: Monday, February 16, 2015 9:19 PM
To: CPCtestimony
Cc: bkulbis@reagan.com
Subject: Submitted testimony for HB1455 on Feb 18, 2015 15:00PM

HB1455

Submitted on: 2/16/2015

Testimony for CPC on Feb 18, 2015 15:00PM in Conference Room 325

Submitted By	Organization	Testifier Position	Present at Hearing
Brett Kulbis	Individual	Oppose	No

Comments: I oppose all legislation that leads to the legalization of marijuana for any reason. Marijuana is an addictive, gateway drug. It significantly impairs bodily and mental functions, and its use is related to increased violence. These are facts. Yet supporters of legalizing the drug conveniently deny or downplay the well-documented dark side of marijuana trafficking and use, arguing that marijuana is a “soft” drug, similar to alcohol, and fundamentally different from “hard” drugs like cocaine or heroin. To equate alcohol with marijuana is both uninformed and misleading. A glass of wine with dinner has been shown to actually improve health. Not so with marijuana. Though it may have some comforting effects, marijuana has no known general healthful properties. Clinical studies have revealed that long-term, moderate consumption impairs short-term memory, slows reaction time, increases the risk of heart attack, and can result in birth defects, strokes, and damage to the respiratory system and brain. Lacking medicinal or preventive powers, marijuana — unlike alcohol — is usually consumed to the point of intoxication. Prolonged use has a negative effect on mental ability that persists beyond the period of intoxication. What about addiction? Legalization advocates note that alcohol and tobacco are addictive, yet legal. Yes, but marijuana is more likely to cause addiction. One study found that more than 30 percent of adults who used marijuana in the course of a year became dependent on it, exhibiting compulsive behavior and signs of withdrawal. Supporters argue that legalizing marijuana would slash drug-related crime. Yet if and when states legalize marijuana, local demand will increase. Meanwhile, some reputable growers, manufacturers, and retailers will refuse to produce or distribute the drug because of standing federal laws and the legal liability that attend to such a dangerous product. The vacuum will be filled by illegal drug cartels and a black or gray market. The National Research Council has concluded that the “long-term use of marijuana may alter the nervous system in ways that do promote violence.” No place serves as a better example than Amsterdam. Though often touted as a well- functioning city with a relaxed attitude toward drugs, Amsterdam is also one of the most violent cities in Europe. In California, as well, the areas around cannabis clubs have experienced exponential increases in crime rates. Pot pushers also offer pie-in-the-sky economic arguments on behalf of their cause. Taxes collected from marijuana sales will easily outweigh the social costs of legalization, they say. However, in encouraging Californians to vote for the Regulate, Control and Tax Cannabis Act of 2010, the National Organization for the Reform of Marijuana Laws predicted a billion-dollar windfall for the state in tax revenues and enforcement savings. A RAND Corporation study subsequently found these projections were riddled with unfounded assumptions. To date, no realistic cost-benefit analysis has been done, yet supporters keep repeating these lies. A report by a federal grant-funded agency in

Colorado found seven specific negative side effects that pot legalization has caused in Colorado: 1) the majority of DUI drug arrests involve marijuana; 2) youth consumption of marijuana has increased; 3) drug-related suspensions/expulsions increased 32 percent over a 5- year period and a majority was for marijuana; 4) an increase in college users; 5) almost 50 percent of Denver arrestees tested positive for marijuana; 6) marijuana-related emergency room visits increased 57 percent from 2011-2013; and 7) marijuana-related hospitalizations has increased 82 percent since 2008. The British health research journal "The Lancet Psychiatry" recently concluded that teens who smoke marijuana are "also 60% less likely to graduate college and seven times more likely to attempt suicide." Today, can we really afford to do this to our keiki, I say no. Recent findings by the Journal of Addiction from Kings College London found that marijuana is highly addictive, causes mental health problems and is a gateway drug to other illegal and dangerous drugs. That report also found that regular adolescent marijuana users have lower educational attainment than non-using peers, that they were more likely to use other illegal drugs, the use produced intellectual impairment, that use doubled the risk of being diagnosed with schizophrenia, and increased the risk of heart attacks in middle-aged adults. The Glaucoma Foundation recently released a statement, based on research, that "medical experts believe that marijuana could actually prove harmful for glaucoma patients." Dr. James Tsai, Chairman of the Department of Ophthalmology and Visual Science at Yale University School of Medicine stated, "We are afraid that people will self-treat their glaucoma with marijuana... They think that even if this unconventional therapy doesn't work, it can't possibly hurt their disease. However, studies suggest that it might in fact be damaging." The reason, according to the Foundation, is that marijuana only lowers pressure in the eye for several hours, requiring patients to medicate day and night. "Failing to do so can lead to a rebound spike in eye pressure, which can be damaging." Finally, regardless of state law, marijuana remains illegal under federal laws, which states have no authority to allow their citizens to disregard. Before you rush any legislation through on this topic, please remember our Keiki and the long term effects this will have on them and future generations. Brett Kulbis Ewa Beach HD-41/SD-19

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

From: mailinglist@capitol.hawaii.gov
Sent: Monday, February 16, 2015 11:49 AM
To: CPCtestimony
Cc: dciccone@ymail.com
Subject: Submitted testimony for HB1455 on Feb 18, 2015 15:00PM

HB1455

Submitted on: 2/16/2015

Testimony for CPC on Feb 18, 2015 15:00PM in Conference Room 325

Submitted By	Organization	Testifier Position	Present at Hearing
Dana Ciccone	Individual	Comments Only	Yes

Comments: HB 1455 intent was to help the patients receive medicine from a caregiver and not the black market. Now with all the changes its not supportable. We need to help fix this broken system of no legal access of medicine by expanding the caregiver/patient ratio. The changes to the original bill don't make any sense. 21 to 28 plants is what a grower needs to take care of different needs patients. We need to think about the patients and not control. We can't limit the number of plants to 14 because we are not moving forward then. It's what we have now... Please make proper changes to this bill and make it work as we need something now to help the people of Hawaii. Mahalo

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

From: mailinglist@capitol.hawaii.gov
Sent: Monday, February 16, 2015 3:08 PM
To: CPCtestimony
Cc: annstarshine@yahoo.com
Subject: Submitted testimony for HB1455 on Feb 18, 2015 15:00PM

HB1455

Submitted on: 2/16/2015

Testimony for CPC on Feb 18, 2015 15:00PM in Conference Room 325

Submitted By	Organization	Testifier Position	Present at Hearing
Elizabeth Davis	Individual	Comments Only	No

Comments: Plant limits are unrealistic for indoor growers. Has anyone actually tried growing? It can take six months to grow one legal plant. How could you grow enough to have the minium allowed? Consentrates take a pound to treat severe conditions. When are we going to take action based on facts instead of fears? Please have some compassion for the many suffering patients trying to live with these complicated processes. Please provide legal access for all patients by allowing reasonable plant limits for all patients and cooperatives. Mahalo.

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

From: mailinglist@capitol.hawaii.gov
Sent: Monday, February 16, 2015 2:54 PM
To: CPCtestimony
Cc: jake@wasabinite.com
Subject: Submitted testimony for HB1455 on Feb 18, 2015 15:00PM

HB1455

Submitted on: 2/16/2015

Testimony for CPC on Feb 18, 2015 15:00PM in Conference Room 325

Submitted By	Organization	Testifier Position	Present at Hearing
Jacob	Individual	Support	No

Comments: Hawaii Really needs to allow patients access to seeds and clones. Currently we have no means of getting Marijuana seeds or clones. Also many terminally ill patients cannot grow their own medicine and people that could care-give for them don't grow high CBD medicine mainly in part to seeds and clones not being available from any vendors or Medical facilities. Also people who need Rick Simpson Oil, or tinctures cannot get enough material to fit their medical needs off the plant numbers and dried flower restrictions currently in place. The bottom line is we need the raise the bar and have all MMJ tested for bugs and mold/pesticides which sadly will not happen without dispensaries... Aloha and God Bless

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

From: mailinglist@capitol.hawaii.gov
Sent: Monday, February 16, 2015 6:05 PM
To: CPCtestimony
Cc: koonceleah@gmail.com
Subject: Submitted testimony for HB1455 on Feb 18, 2015 15:00PM

HB1455

Submitted on: 2/16/2015

Testimony for CPC on Feb 18, 2015 15:00PM in Conference Room 325

Submitted By	Organization	Testifier Position	Present at Hearing
Leah M. Koonce	Individual	Support	No

Comments: Please support this bill as many of us who choose marijuana as the best medicine for our conditions have waited a very long time for safe access. This bill has reasonable requests that I hope you will pass. Thank You. Leah M Koonce (808)561-9522 85-638 Farrington hwy Waianae, Hawaii 96792

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

From: mailinglist@capitol.hawaii.gov
Sent: Saturday, February 14, 2015 5:18 AM
To: CPCtestimony
Cc: mary@maui.vortex.com
Subject: Submitted testimony for HB1455 on Feb 18, 2015 15:00PM

HB1455

Submitted on: 2/14/2015

Testimony for CPC on Feb 18, 2015 15:00PM in Conference Room 325

Submitted By	Organization	Testifier Position	Present at Hearing
Mary Overbay	Individual	Oppose	No

Comments: I oppose HB 1455 because it places a huge expense on the weary shoulders of Hawai'i's seriously ill medical marijuana patients, while the billion dollars a year recreational market remains unregulated and untaxed. It violates marijuana consumer's equal rights, and violates their right to the pursuit of happiness. I support Legalizing, taxing, and regulating marijuana in equality with alcohol. Marijuana is a far less dangerous and addictive drug than alcohol; therefore it is prejudice against marijuana consumers to deny them the same rights that are granted to alcohol consumers. Alcohol Prohibition was a failure and the Marijuana Prohibition is a worse failure. Families are broken and lives shattered by arrests for "marijuana crimes," while wasting millions of tax dollars. Colorado has legalized recreational marijuana, transforming a lucrative black market into a booming commercial sector with \$7 million in tax revenue in the first quarter. Hawaii has an estimated billion dollars a year in illegal marijuana sales, it is time to legitimize the thousands of workers in Hawai'i's black market industry and start collecting millions of dollars of revenue. WIN-WIN-WIN for Hawai'i! Legalize, Tax & Regulate recreational marijuana, now! It is the right thing to do. It is the right time to do it.

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

From: mailinglist@capitol.hawaii.gov
Sent: Monday, February 16, 2015 9:47 PM
To: CPCtestimony
Cc: jmlandes@gmail.com
Subject: Submitted testimony for HB1455 on Feb 18, 2015 15:00PM

HB1455

Submitted on: 2/16/2015

Testimony for CPC on Feb 18, 2015 15:00PM in Conference Room 325

Submitted By	Organization	Testifier Position	Present at Hearing
Mike Landes	Individual	Support	No

Comments: Please support HB 1455. The current limits on caregiver to patient ratios make it difficult for patients to acquire their medicine. By expanding the number of patients each caregiver may provide care for, we can ensure that more patients have safe access to quality medication.

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

woodson2-Rachel

From: mailinglist@capitol.hawaii.gov
Sent: Sunday, February 15, 2015 12:13 AM
To: CPCtestimony
Cc: ninja01@hawaii.rr.com
Subject: Submitted testimony for HB1455 on Feb 18, 2015 15:00PM

HB1455

Submitted on: 2/15/2015

Testimony for CPC on Feb 18, 2015 15:00PM in Conference Room 325

Submitted By	Organization	Testifier Position	Present at Hearing
stuart saito	Individual	Support	No

Comments: I support this bill as a lot of caregivers can help more than one patient and will allow more people to get the help they require especially when they know someone but cant help them because they are limited to helping only one person

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

Testimony Offered for Saturday February 7, 2015, 10am
Heard by the Committee on Health and Committee on Judiciary
House of Representatives, The Twenty-Eighth Legislature, Regular Session of 2015
Measure number 1455
Testimony offered by:
Michelle Tippens
aka TheGoddessM
Staff Writer
Kaulana Na Pua Magazine

Good morning, of the Judiciary and Health committees, my name is Michelle Tippens and I am a resident and active voter in Makiki, within the boundaries of the Ahupua'a of Honolulu, on the Island of O'ahu. I am a disabled veteran of the US Army, a single mother, a full time student (at Kapi'olani Community College, obtaining my third upper level degree), a journalist with a staff position at the Kaulana Na Pua Magazine and a medical marijuana patient. I have an extensive list of medical conditions and injuries, the highlights of which are composed of multiple traumatic brain injuries, a degenerative condition in my cerebellum and spine, fibromyalgia, multiple fractured vertebrae, PTSD and a ribcage so damaged I had to undergo surgery in order to have it wired back together and bone grafted in to facilitate healing. Medical marijuana has allowed me to manage my symptoms so effectively I have been able to discontinue the use of over 25 prescription medications, many of which I had been given for over a decade. Further, I have been able to recover my well-being and a significant portion of my lost mobility, as I had at one point been confined to the use of a walker for over 2 years having progressed from using a cane as my condition deteriorated. All of my conditions still affect me daily; however, therapeutic marijuana use has allowed me to engage in my life at a level beyond that dictated by my injuries and illnesses. That said, I would like to address the bill before the committee today regarding medical marijuana in the state of Hawaii, namely House Bill 1455.

This bill seeks to expand patient rights under the current program to allow people to exchange medical marijuana with other licensed patients as well as makes increases to the current program in the areas of patient to caregiver ratio and plants allowable per certified patient. I am in support of this bill for several reasons, not the least of which is the simple mathematics that must accompany attempts to supply medical marijuana to a patient in amounts that are substantial enough to be therapeutic. This algebra, while simple, oftentimes escapes us when we are not dealing firsthand with the growth of medical marijuana. Put simply, medical marijuana grows over a period of 4-6 months, dependent upon the specific strain. On average, an amateur grower can yield 1-2 ounces per plant if growing indoors (a rather expensive endeavor). Therefore, under the current program standards, 7 plants, gleaming 2 ounces over the period of 4 months (this is the most favorable situation) will result in the patient having approximately 14 ounces of medicine every 4 months, or 3.5 ounces per month. It is not uncommon for a medical marijuana patient to use 4-6 ounces monthly, if not more, to manage their symptoms. I personally utilize approximately 6 ounces monthly while maintaining a B average at KCC. The current parameters for the medical marijuana are, simply put, inadequate for the needs of medical patients.

The fact is, many people like myself have injuries or medical conditions that make the sheer physical labor of growing marijuana a rather arduous task and many would prefer to be able to go to a store or a farmer to purchase their medication. Additionally, growers are often familiar with the strain selection and can offer guidance to patients. I am presented with questions daily regarding strain selection and oftentimes patients do not understand what they are looking for simply because the only information they are able to draw from comes from mass media, which is a poor place from which to draw an

Testimony Offered for Saturday February 7, 2015, 10am
Heard by the Committee on Health and Committee on Judiciary
House of Representatives, The Twenty-Eighth Legislature, Regular Session of 2015
Measure number 1455
Testimony offered by:
Michelle Tippens
aka TheGoddessM
Staff Writer
Kaulana Na Pua Magazine

education, in particular an education regarding one's health. Passing HB1455 would allow those most adept at growing medical marijuana to do so as caregivers for more than one person, allowing them to provide safe, effective medicine to several patients while also allowing patients to have better access to these more adept growers. This bill continues to allow people who prefer to grow their own medicine at home to do so, while allowing others who choose to go to a caregiver and receive the medication they have decided is best for them as well. In reality, this bill simply looks to give the freedom to choose back to the people within the arena of medical marijuana.

An increase to the patient caregiver ratio under the current medical marijuana program would allow patients to obtain their doctor's recommendation and select a caregiver who has already demonstrated their ability to cultivate quality medicine from whom to purchase medical marijuana to address their specific needs and medicative demands. This would also allow patients to enter into the patient-caregiver relationship with a realistic expectation regarding the quality of medical marijuana they will receive. This increase also allows for the price of medical marijuana to decrease, reducing the burden placed upon patients under the current system. This cost reduction results from the disproportionate increase to supply expense in relation to the number of plants grown.

I would like to conclude by stating that I support HB1455. While I may not believe this bill is flawless or the final solution to a rapidly shifting area within our society and culture, I believe this bill is an essential step toward indemnifying the people of the suffering they have endured using less natural methods to treat illnesses and chronic conditions. The beauty of a democratic legislative system is its plasticity, its ability to evolve with the demands of the people for freedom and the needs of the community for safety. As issues with the bill's implementation are isolated, amendments can be voted upon and enacted. I count myself blessed to live within a society that facilitates our ability as a community to create legislation and continue to adjust it as the need arises. I encourage the 2015 Legislature of Hawaii to enact HB1455, and mahalo again for your attention during my testimony.

HR1455 HD1: COMMENTS

Chair McKelvey, Vice Chair Woodson and members of the House Consumer Protection and Commerce Committee. Thank you for this opportunity to provide personal testimony in support & major concerns on HB1455 HD1.

My name is Jari Sugano of Mililani, Oahu. I have served close to 20 years in Hawaii's commercial agriculture field in both the private and public sectors. I currently serve as a County Extension Agent at UH Manoa, College of Tropical Agriculture and Human Resources and assist commercial fruit and vegetable producers on Oahu. Today, I am providing personal testimony on HB1455 HD1.

I am also the mother and caregiver of a local girl name Maile Jen Kaneshiro who has been living daily with intractable seizures. When you are the parent of a child with intractable seizures, you often wonder if the next seizure will be the one to take their life. Time is of the essence. Our daughter Maile suffers from 5 different seizure types. At the age of 5 she reached the end of the road for traditional epilepsy management due to drug failures with legally prescribed pharmaceuticals such as phenobarbital, mysoline, keppra, topamax, zonegram, stirepentol, clobazam, depakote, klonipin, bromide, clonidine, concerta, abilify, adderal, risperidon, the ketogenic diet, and non FDA approved drugs. Many of these medications were not intended for a child of her age.

We turned to medical marijuana as a last resort effort to save Maile's life. For the past 16 months I have navigated through Hawaii's Medical Marijuana Program with complete frustration as a parent of a child with severe medical needs and as a trained agriculturalist.

In October 2013, my daughter applied and received her Hawaii state medicinal marijuana card. At the onset of starting with the program, there was no form of access for cannabis seeds, plants, processed or manufactured cannabis products. Caregiver, how do you go about finding one? We were forced to find our own plants with unknown potency and stay within the state's 'one size fits all' plant limit of 7 plants / patient. It took 4 months before we reaped our first harvest. From seven plants we yielded less than 1 ounce of dried flower buds.

In hindsight, as a trained agriculturalists for nearly 20 years and now "experienced" cannabis caregiver, I found the cultivation process extremely difficult. I endured multiple propagation failures, experienced timing (supply) issues, poor yields, pest problems, and wasted a year growing strains of cannabis of little help to her. Furthermore, since Hawaii does not allow laboratories to test cannabis without penalty, it is virtually impossible to know what dosage Maile is on, or any other cannabis user for that matter. Without understanding the compounds in locally grown cannabis products, it is evident that long term seizure control is highly improbable.

How many people can do this for themselves or others they care for? How many qualifying patients have 4 months to wait for initial treatment?

Thank you for amending the caregiver to patient ratio to 1:3. However, limiting the number of cannabis plants grown for medical marijuana use to no more than fourteen marijuana plants per single property is not progress. This is the status quo, since a patient can currently caregiver for another patient. No commercial agricultural operation in Hawaii could be sustainable under such guidelines.

Each cannabis strain has different levels of cannabinoids based on its intent and end use. At the very least, please consider amending the current bill to 28 plants per single property, understanding that plants of various growth stages must be manipulated to accommodate the patients' medicinal needs and caregiver's good judgment of implementing good neighbor practices.

I understand the community's public safety concern, however, those who abuse the law would not go through the effort of obtaining a medical marijuana card, paying the annual fees, having their address and other identifying information on file with the Hawaii Department of Health. The system continues to penalize patients that are following the law while those who abuse the system hurt the overall process.

More patients are looking to high cannabidiol (CBD) cannabis strain for various ailments. CBD germplasm on the island are relatively low in CBD (1-10%), patients may require anywhere from 4-8 ounces of cannabis a week (depending on body weight). For our daughter, combine that quantity with 2 parents who work full time and a lack of time to foster plants. The result will always equal a lack of supply.

Please re-consider these plant numbers so patients like Maile can finally get the treatments they desperately need. I would turn my daughter's card over to the best cannabis caregiver I can find. Because, in a time of medical need, no family should have to struggle with growing, manufacturing, supply lapse, and estimating the potency of their medication.

Thank you for the opportunity to express my concerns with HB1455 HD1.

Jari S.K. Sugano, Mililani, Oahu

House Committee on Consumer Protection and Commerce

Angus McKelvey, Chair

Justin Woodson, Vice Chair

Re: HB1455 HD1 – Relating to Medical Marijuana

Hearing: Wednesday, February 18, 2015, 3:00 pm, Room 325

From: Clifton Otto, MD

Position: **Oppose**

What started off as an effort to improve the access of patients to Marijuana for medical use has been subverted to further restrict the ability of patients to grow for themselves.

Even with the current number of seven plants per patient, it is very challenging to grow enough plants to maturity given that a certain number of baby plants, which are included in the total plant count, must be held in reserve to account for the plant die-off that routinely occurs with any agricultural endeavor.

Restricting the number of plants per property to fourteen will force patients to grow much larger plants that can yield up to one pound per plant, thereby increasing the chance of excess material and diversion.

If the fear is that patients are growing too many plants on one property, then you should protect our patients' right to grow collectively and regulate accordingly.

The parents of pediatric patients with intractable seizure disorders need to be able to combine their resources in order to successfully grow the medicine that their children need. This is especially true on the island of Oahu, where suitable space and land is extremely limited.

From: mailinglist@capitol.hawaii.gov
Sent: Tuesday, February 17, 2015 1:34 PM
To: CPCtestimony
Cc: brentneal@live.com
Subject: Submitted testimony for HB1455 on Feb 18, 2015 15:00PM

HB1455

Submitted on: 2/17/2015

Testimony for CPC on Feb 18, 2015 15:00PM in Conference Room 325

Submitted By	Organization	Testifier Position	Present at Hearing
Brent Neal	Individual	Oppose	No

Comments: I do not support HB 1455. I did support the original version, however it has been grossly perverted at this point. This bill has become self contradictory. To say that only 14 plants can be grown per TMK number is outrageous and will be problematic for people living together. For example, a household having three medical cannabis patients living on the same property, would be adversely effected by this bill. This bill would prevent people who have a green thumb from acting as a patient's caregiver in many circumstances and would limit access to medicine rather than improve it. Additionally, to say that a caregiver shall be responsible for no more than three qualifying patients means that they could potentially be responsible for 21 plants. If they themselves are also a patient the number would rise to 28 plants. How is this possible if no TMK number can have more than 14 plants grown on it? Furthermore, to propose this act take effect in 2050 is outright insulting to the medical cannabis community.

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

From: mailinglist@capitol.hawaii.gov
Sent: Tuesday, February 17, 2015 1:39 PM
To: CPCtestimony
Cc: britneal@live.com
Subject: Submitted testimony for HB1455 on Feb 18, 2015 15:00PM

HB1455

Submitted on: 2/17/2015

Testimony for CPC on Feb 18, 2015 15:00PM in Conference Room 325

Submitted By	Organization	Testifier Position	Present at Hearing
Brittany Neal	Individual	Oppose	No

Comments: I do not support HB 1455. I did support the original version, however it has been grossly perverted at this point. This bill has become self contradictory. To say that only 14 plants can be grown per TMK number is outrageous and will be problematic for people living together. For example, a household having three medical cannabis patients living on the same property, would be adversely effected by this bill. This bill would prevent people who have a green thumb from acting as a patient's caregiver in many circumstances and would limit access to medicine rather than improve it. Additionally, to say that a caregiver shall be responsible for no more than three qualifying patients means that they could potentially be responsible for 21 plants. If they themselves are also a patient the number would rise to 28 plants. How is this possible if no TMK number can have more than 14 plants grown on it? Furthermore, to propose this act take effect in 2050 is outright insulting to the medical cannabis community.

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

POLICE DEPARTMENT
CITY AND COUNTY OF HONOLULU

801 SOUTH BERETANIA STREET • HONOLULU, HAWAII 96813
TELEPHONE: (808) 529-3111 • INTERNET: www.honoluluupd.org

LATE

KIRK CALDWELL
MAYOR



LOUIS M. KEALOHA
CHIEF

DAVE M. KAJIHIRO
MARIE A. MCCAULEY
DEPUTY CHIEFS

OUR REFERENCE JK-TA

February 18, 2015

The Honorable Angus L. K. McKelvey, Chair
and Members
Committee on Consumer Protection
And Commerce
State House of Representatives
Hawaii State Capitol
415 South Beretania Street
Honolulu, Hawaii 96813

Dear Chair McKelvey and Members:

SUBJECT: House Bill No. 1455, H.D. 1, Relating to Medical Marijuana

I am Jason Kawabata, Captain of the Narcotics/Vice Division of the Honolulu Police Department, City and County of Honolulu.

The Honolulu Police Department opposes House Bill No. 1455, H.D. 1, Relating to Medical Marijuana.

This bill seeks, in part, to increase the maximum number of qualifying patients that a primary caregiver may care for at any given time. If passed, this bill would increase the allowable supply of marijuana under the control of the primary caregiver. This increased supply will increase the chance that the marijuana will be diverted for illegal use or distribution.

The Honolulu Police Department urges you to oppose House Bill No. 1455, H.D. 1, Relating to Medical Marijuana.

Thank you for the opportunity to testify.

Sincerely,

A handwritten signature in black ink, appearing to read "Jason Kawabata".

Jason Kawabata, Captain
Narcotics/Vice Division

APPROVED:

A handwritten signature in black ink, appearing to read "Louis M. Kealoha".

Louis M. Kealoha
Chief of Police

From: mailinglist@capitol.hawaii.gov
Sent: Tuesday, February 17, 2015 5:28 PM
To: CPCtestimony
Cc: ilovelauren.es@gmail.com
Subject: Submitted testimony for HB1455 on Feb 18, 2015 15:00PM

LATE

HB1455

Submitted on: 2/17/2015

Testimony for CPC on Feb 18, 2015 15:00PM in Conference Room 325

Submitted By	Organization	Testifier Position	Present at Hearing
Elijah shields	Individual	Comments Only	No

Comments: I opposed strongly the reasons being it would not be beneficial two patients to minimize the number of plants is anything patients need to be increased the number thats good what patients have been asking for this whole time you guys say that this is to help medical patients and to help provide them with the right all you are doing is stripping their rights and their ability to Medicaid and care for themselves to make it so they have to go to a third party Black Market drug dealer rather than being able to grow and organic safe medicine for themselves and to have an adequate supplies 14 plants just is not enough and if you have a patient with to caregivers that's twenty eight planets more than you're allowed per single property how is that going to work when you can have to care patient a patient and caregivers but 14 plants per property that does not equal

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

From: mailinglist@capitol.hawaii.gov
Sent: Tuesday, February 17, 2015 5:43 PM
To: CPCtestimony
Cc: jdfarmshi@gmail.com
Subject: Submitted testimony for HB1455 on Feb 18, 2015 15:00PM
Attachments: hp 1455.rtf

LATE

HB1455

Submitted on: 2/17/2015

Testimony for CPC on Feb 18, 2015 15:00PM in Conference Room 325

Submitted By	Organization	Testifier Position	Present at Hearing
john rogan	Individual	Comments Only	No

Comments: lets all work in aloha

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

From: mailinglist@capitol.hawaii.gov
Sent: Tuesday, February 17, 2015 6:09 PM
To: CPCtestimony
Cc: konagold@starband.net
Subject: Submitted testimony for HB1455 on Feb 18, 2015 15:00PM

LATE

HB1455

Submitted on: 2/17/2015

Testimony for CPC on Feb 18, 2015 15:00PM in Conference Room 325

Submitted By	Organization	Testifier Position	Present at Hearing
Rev, Dennis Shields	Individual	Comments Only	No

Comments: Aloha myself and two of my intimate family members who reside on our property have been able to supply our medicinal needs by growing 7 plants apiece since the med pot program began in 2001 to limit the amount to ONLY 14 plants per our property would greatly diminish our supply to the point of inadequacy please increase the limit per property to no fewer than 21 plants or our family will be harmed Aloha Rev. Dennis Shields

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

LATE

COMMUNITY ALLIANCE ON PRISONS

P.O. Box 37158, Honolulu, HI 96837-0158

Phone/E-Mail: (808) 927-1214 / kat.caphi@gmail.com



COMMITTEE ON CONSUMER PROTECTION & COMMERCE

Chair: Rep. Angus McKelvey

Vice Chair: Rep. Justin Woodson

Wednesday, February 18, 2015

3:00 p.m.

Room 325

COMMENTS ON HB 1455 HD1 - MEDICAL MARIJUANA PROGRAM

Aloha Chair McKelvey, Vice Chair Woodson and Members of the Committee!

My name is Kat Brady and I am the Coordinator of Community Alliance on Prisons, a community initiative promoting smart justice policies for almost two decades. This testimony is respectfully offered on behalf of the 5,600 Hawai'i individuals living behind bars, always mindful that more than 1,600, and soon to be rising number of Hawai'i individuals who are serving their sentences abroad, thousands of miles away from their loved ones, their homes and, for the disproportionate number of incarcerated Native Hawaiians, far from their ancestral lands.

HB 1455 HD1 increases the maximum number of qualifying patients that a primary caregiver may care for at any given time. Requires each primary caregiver upon registration to disclose to the Department of Health the number of qualifying patients and other patient information for whom the caregiver is responsible. Limits the number of marijuana plants that can be grown for medical marijuana use to 14 plants at a single property.

Community Alliance on Prisons offers comments on this measure.

Since the medical marijuana program started 15 years ago, knowledge about the medical properties and usefulness of cannabis/marijuana has advanced, or at least come above-ground. For instance, the methods used to ingest marijuana vary. Some patients juice the leaves of the marijuana plant, some make an oil that they add to the patient's food, some patients vaporize it.

All these methods take different amounts of the plant to produce. The HD1 removes the increase in plant count, the authorization of transfers, and lowers the new caregiver ratio to 3:1.

This strikes us as inhumane as there are 13,000 patients registered in Hawai`i and only 1,600 caregivers. It is difficult to find a person to help you when you are sick and your energy is focused on staying alive. I have personally been a caregiver to 3 terminally ill people, and I know this to be true.

Community Alliance on Prisons opposes the sunset in the bill that requires caregivers to reduce their number of their patients once dispensaries are open. This denies a very basic tenet of how we live in Hawai`i. We form relationships/bonds with people. Caregivers and patients form a very special bond that may be hard for some to understand. If you have ever been in a situation like this, however, you would know this to be true.

We are not sure that the drafter of this bill meant it, but by limiting the number of plants at a TMK, it actually limits a caregiver to grow for only 2 patients – one of whom may be the caregiver him/herself. This limitation would also mean that family members could be prevented from helping their loved ones. That surely denies how we live in Hawai`i.

Community Alliance on Prisons respectfully requests the committee to restore the original, patient-centric language to this bill.

Mahalo for this opportunity to testify.

From: mailinglist@capitol.hawaii.gov
Sent: Wednesday, February 18, 2015 1:47 AM
To: CPCtestimony
Cc: andreatischler@yahoo.com
Subject: Submitted testimony for HB1455 on Feb 18, 2015 15:00PM

LATE

HB1455

Submitted on: 2/18/2015

Testimony for CPC on Feb 18, 2015 15:00PM in Conference Room 325

Submitted By	Organization	Testifier Position	Present at Hearing
Andrea Tischler	Americans for Safe Access Big Island Chapter	Support	No

Comments: HB1455 Submitted on: 2/6/2015 Testimony for HLT on Feb 7, 2015 10:00AM in Conference Room 329 Submitted By Organization Testifier Position Present at Hearing Andrea Tischler Americans for Safe Access Big Island Chapter Support No Comments: This bill is extremely important to medical cannabis patients as it will allow for one caregiver to provide for the needs of five patients. With over 13,000 patients and only 1,600 caregivers patients will be better able to obtain their medicine without resorting to buy in the black market by increasing the patient to caregiver ratio. Americans for Safe Access strongly support this measure. Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing. Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

From: mailinglist@capitol.hawaii.gov
Sent: Wednesday, February 18, 2015 6:45 AM
To: CPCtestimony
Cc: gregswanson601@yahoo.com
Subject: Submitted testimony for HB1455 on Feb 18, 2015 15:00PM

LATE

HB1455

Submitted on: 2/18/2015

Testimony for CPC on Feb 18, 2015 15:00PM in Conference Room 325

Submitted By	Organization	Testifier Position	Present at Hearing
Gregory Swanson	Individual	Oppose	No

Comments: Lifetime resident of Oahu, registered patient and user of medical marijuana Honolulu, HI 96815
Testimony of a lifetime resident of Oahu, registered patient and user of medical marijuana In opposition of HB1455, Controlled Substances; Marijuana; Hashish Before the Senate Twenty-Eight Legislature 2015, State of Hawaii February 18, 2015 I OPPOSE THE AMENDMENTS, AND SPECIFICALLY ANY PLANT LIMITS, AND THEREFORE THE BILL OF HB1455, AS LONG AS WE FAIL TO HAVE A SAFE ACCESS SYSTEM, AND MEDICALLY INAPPROPRIATE QUOTAS ON PLANT LIMITS. CANCER AND RHEUMATOLOGICAL PATIENTS NEED TO BE JUICING CANNABIS, MIXED WITH OTHER ANTI-INFLAMMATORY ROOTS AND HERBS, AND NEED PLANT LIMITS OF 50 OR MORE. SB228 WOULD BAN JUICING AND OILS PROFOUNDLY NEEDED. PLUS, DO YOU WANT KIDS WITH SEIZURES TO HAVE TO SMOKE CANNABIS? WHAT AN ABSURD AND CRUEL IDEA. ! There fore I urge the committee to oppose HB1455, SB228 Thank you.

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

From: mailinglist@capitol.hawaii.gov
Sent: Tuesday, February 17, 2015 9:01 PM
To: CPCtestimony
Cc: jwm7r@virginia.edu
Subject: Submitted testimony for HB1455 on Feb 18, 2015 15:00PM

LATE

HB1455

Submitted on: 2/17/2015

Testimony for CPC on Feb 18, 2015 15:00PM in Conference Room 325

Submitted By	Organization	Testifier Position	Present at Hearing
Jordan Moniuszko	Individual	Support	No

Comments: Increasing the number of patients a caregiver can supply is a good idea. The care and skill involved in properly growing these plants is the most important part of the marijuana medication process. Insuring that these plants are of a quality that will serve the health of the patients should be the top priority.

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

LATE

Aloha Chair McKelvey and members of the Consumer Protection Committee:

Thank you for the opportunity to testify in opposition to HB 1455. This bill sets the foundation to enact all other medical marijuana house bills presented this session. It gives more access to caregivers, greatly increasing the number of people who can access medical marijuana. It increases the number of plants that a patient can have from 1 to 3.

Increasing the number of patients who can access marijuana, as well as how many plants they can grow will open the gates to deregulated marijuana use in Hawaii as well as dramatically increase the possibility of its misuse.

Instead, I urge you Consumer Protection and Commerce Committee members to pass more regulatory legislation on marijuana before passing this bill unhindered. It is the job of the state and legislators to act in the best interest of the people. Passing this bill would do more harm than good for the people of Hawaii by enabling more citizens to grow and distribute marijuana before the necessary legal infrastructure is in place.

We have a family member who is a Physician in Colorado.

Shared the problems they are facing. One problem pertains to the Justice of Law. Police officers have a breathalyzer test for alcohol, but not a test for marijuana.

How much is too much of the influence to drive and how do they test it?

I appreciate your consideration and strongly encourage you to rethink the interests for ALL the people of Hawaii before passing this bill.

Mahalo,
Dr. & Mrs. Ken Yasuhara
Honolulu, Hawaii 96825

Registered Voters in District 18

From: mailinglist@capitol.hawaii.gov
Sent: Tuesday, February 17, 2015 7:29 PM
To: CPCtestimony
Cc: ninja01@hawaii.rr.com
Subject: Submitted testimony for HB1455 on Feb 18, 2015 15:00PM

LATE

HB1455

Submitted on: 2/17/2015

Testimony for CPC on Feb 18, 2015 15:00PM in Conference Room 325

Submitted By	Organization	Testifier Position	Present at Hearing
stuart saito	Individual	Support	No

Comments: I support caregivers being able to support more than one qualifying patient at a given time but there should be an amendment to allow more than 14 plants, if 1 caregiver has more than 2 qualifying patients 14 plants will not support them

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov