

JOSH GREEN, M.D.
GOVERNOR



STATE OF HAWAII | KA MOKU'ĀINA 'O HAWAII
DEPARTMENT OF PUBLIC SAFETY
Ka 'Oihana Ho'opalekana Lehulehu
1177 Alakea Street
Honolulu, Hawaii 96813

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DIRECTOR

Melanie Martin
Deputy Director
Administration

Michael J. Hoffman
Acting Deputy Director
Corrections

William F. Oku
Deputy Director
Law Enforcement

No. _____

TESTIMONY ON SENATE BILL 673
RELATING TO MEDICAL CANNABIS

By
Tommy Johnson, Director

Senate Committee on Health and Human Services
Senator Joy A. San Buenaventura, Chair
Senator Henry J.C. Aquino, Vice Chair

Monday, February 06, 2023; 1:00 p.m.
CR 225 and Via Videoconference

Chair San Buenaventura, Vice Chair Aquino, and Members of the Committee:

The Department of Public Safety (PSD) offers comments on Senate Bill (SB) 673, which seeks to allow health care facilities to permit terminally ill patients to use medical cannabis under certain conditions.

SB 673, page 5, lines 2-5, defines applicable and excluded health care facilities. PSD respectfully requests correctional facilities are included in the definition of an excluded health care facility. SB 673, page 5, lines 3-5 currently reads: "Health care facility" does not include a chemical dependency recovery hospital or a State hospital." PSD requests the following change: "Health care facility" does not include a chemical dependency recovery hospital, a State hospital, or health care programs within jails and prisons operated by the Department of Public Safety or its successor.

Over 80% of Hawaii's incarcerated individuals experience some level of involvement with substance misuse. PSD promotes rehabilitation and avoids potential opportunities for medication diversion to individuals who use drugs while in our care through various measures for the prevention of the misuse or abuse of prescribed medication (e.g., see, for example, Tamburello et.al. (2022).

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Senate Committee on Health and Human Services
February 6, 2023
Page 2

PSD respectfully requests the committee consider the issue of medication diversion as an everyday challenge for the individuals in our care and continue to support the organizational shift to a rehabilitation model.

Thank you for the opportunity to provide comments on SB 673.



**TESTIMONY OF
THE DEPARTMENT OF THE ATTORNEY GENERAL
KA 'OIHANA O KA LOIO KUHINA
THIRTY-SECOND LEGISLATURE, 2023**

ON THE FOLLOWING MEASURE:

S.B. NO. 673, RELATING TO MEDICAL CANNABIS.

BEFORE THE:

SENATE COMMITTEE ON HEALTH AND HUMAN SERVICES

DATE: Monday, February 6, 2023 **TIME:** 1:00 p.m.

LOCATION: State Capitol, Room 225

TESTIFIER(S): Anne E. Lopez, Attorney General, or
Andrew Goff, Deputy Attorney General

Chair San Buenaventura and Members of the Committee:

The Department of the Attorney General (Department) offers the following comments.

This bill would amend chapter 329, Hawaii Revised Statutes (HRS), to require health care facilities in the State to allow terminally ill patients to use medical cannabis (page 1, lines 7-10). "Health care facility" is defined as having the same meaning as section 323D-2, HRS, but does not include chemical dependency recovery hospitals or a State hospital (page 5, lines 2-5). Section 323D-2, HRS, defines "health care facility" very broadly to include "any program, institution, place, building, or agency, or portion thereof, private or public, other than federal facilities or services, whether organized for profit or not, used, operated, or designed to provide medical diagnosis, treatment, nursing, rehabilitative, or preventive care to any person or persons."

The bill would therefore require every facility that provides medical services to a terminally ill patient, except for chemical dependency recovery hospitals or a State hospital, to allow medical cannabis use.

This could be subject to challenge because cannabis use is still prohibited by federal law, which could potentially put a facility's federal funding in jeopardy or expose the facility to other legal risks .

We note that the bill includes a provision that requires a covered health care facility to suspend patient use of medical cannabis if a federal agency initiates an

enforcement action against the facility, or if a federal agency prohibits the use of medical cannabis on the facility premises (page 3, line 15, through page 5, line 13). However, there is no guarantee that any federal enforcement action would be abated once the facility suspends patient use of medical cannabis.

If the intent is to clarify that, under State law, a health care facility may allow the use of medical cannabis by terminally ill patients, the Department recommends changing the "shall" on page 1, line 9, to "may" and deleting section 329 - (g) on page 4, lines 14-19.

Thank you for the opportunity to provide comments.



Dedicated to safe, responsible, humane and effective drug policies since 1993

TESTIMONY IN SUPPORT OF SB 673

TO: Chair San Buenaventura, Vice Chair Aquino & Committee Members

FROM: Nikos Leverenz
DPFH Board President

DATE: February 6, 2023 (1:00 PM)

Drug Policy Forum of Hawai'i (DPFH) **strongly supports** SB 673, which would require that healthcare facilities providing hospice services in Hawaii allow terminally ill patients to consume cannabis in a manner that is safe and unintrusive to other patients, guests, and staff.

Medical cannabis is most commonly used for pain relief and is also used to improve appetite and reduce nausea. In certain cases, it can be used as an alternative to heavy pain relievers like fentanyl and morphine. Many terminally ill patients choose to use cannabis for treatment or pain relief and wish to continue that use while at the hospital. Allowing this ensures that patients have consistency in their treatment.

California's Compassionate Access to Medical Cannabis Act (also known as Ryan's Law) passed the legislature unanimously in 2021 and was signed into law by Governor Gavin Newsom. As a result, terminally ill Californians have had access to medical cannabis in healthcare facilities since January 1, 2022. (A second bill further easing access to cannabis in hospitals for terminally ill California patients was signed into law in 2022 and takes effect this year.)

While medical cannabis in Hawai'i is legal, it remains a Schedule I drug at the federal level. Healthcare facilities that are Medicare and/or Medicaid providers receive accreditation from the Centers for Medicare and Medicaid Services (CMS) and are generally required to comply with local, state, and federal laws in order to continue receiving reimbursements. Consequently, many healthcare facilities have adopted policies prohibiting cannabis on their grounds out of a perceived risk of losing federal funding if they were to allow it.

This fear is unfounded, as the Medicare and Medicaid regulations do not address the use of medical cannabis, and CMS states that it is not aware of a provider that has specifically lost funding or been penalized for permitting the use of medical cannabis. Furthermore, CMS states it would not cite healthcare facilities for allowing medical cannabis use unless the US Department of Justice (US DOJ), declares its intent or acts to interfere with state medical cannabis laws.

To address any lingering concerns about federal intervention, this bill provides a safe harbor clause. Healthcare facilities would be permitted to suspend compliance with this bill if a federal regulatory agency, the US DOJ, or CMS takes specified actions, including initiating an enforcement action against a healthcare facility for its compliance with a state regulated medical cannabis program, or otherwise issuing a rule or notice that expressly prohibits the use of medical cannabis in healthcare facilities.

Americans for Safe Access, a longstanding organization dedicated to ensuring safe and legal access to cannabis for therapeutic use and research, has an [online resource guide to assist healthcare facilities with the implementation](#) of Ryan’s Law in California that should also be of value to Hawai’i facilities.

Thank you for the opportunity to testify on this important measure.

Ken Sobel, Esq.
 Vice President, Genesis International Cannabis Solutions, Inc.
 Vice President Nature Nurse Collective, Inc.
 Former President, Grossmont College Foundation
 Licensed Attorney and Counsel in Arizona & California Since 1980
 Practice Limited to Medical & Adult Use Commercial Cannabis Licensing & Operations
 All Aspects of Cannabis and Hemp Law, Business, Policy & Patient Advocacy
 2511 Via Viesta
 La Jolla, CA 92037
 email: kennysocal711@gmail.com
 cell: 619-208-2439

To: The Honorable Chairperson and Members of the Committee on Health and Human Services of the Senate for the 32d Legislature of the Great State of Hawaii:

My name is Ken Sobel. I am an attorney licensed to practice in the States of California and Arizona for the past 43 years, and General Counsel for the Cannabis Nurses Network (“CNN”) and the Arizona Cannabis Nurses Association (“AZCNA”). My testimony today is in support of SB 673 Relating to Medical Cannabis to Allow hospitals and healthcare facilities to **permit terminally ill patients to use medical cannabis while in-patients under certain conditions.**

I assisted in the drafting of **California SB 311 for which HB 957 is patterned after.** SB 311 was the third iteration of the bill originally filed in the California Senate in 2019. **It passed the first time unanimously.** Fundamentally, the bill supports a dying person’s right to choose a beneficial plant medicine for pain relief because he or she chooses to do so. Although the first iteration was vetoed by Governor Newsome, it was only done so based upon the mistaken belief that CMS could possibly deny Medicare reimbursement to the host facilities. Subsequently, CMS confirmed in writing that it had no rules that would deny such reimbursement on that basis, and Ryan’s Law was again passed by every member of the California Legislature. [A copy of the CMS email is attached. **Like California, Hawaii is also in CMS Region 9**].

On September 28, 2021, Governor Gavin Newsom signed SB 311, also known as “Ryan’s Law”, requiring healthcare facilities to allow the use of medical cannabis on their premises for terminally ill patients with a valid Medical Marijuana Identification Card (MMIC) or/ recommendation from an attending physician. The law was passed by the legislature with support from a diverse group of organizations including the Cannabis Nurses Network, Americans for Safe Access (ASA), and many others. The law went into effect January 1, 2022 and applies to all CA health care facilities including acute care hospitals, special hospitals, skilled nursing facilities, congregate living health facilities, or hospice providers (excluding the emergency department of a health care facility, chemical dependency recovery hospitals and state hospitals).

Ryan’s law was passed in honor of Ryan Bartell who was diagnosed with Stage 4 pancreatic cancer at the age of 41. As his condition progressed, he was admitted to the palliative wing of a hospital where he spent his first four and a half weeks on fentanyl to treat his pain. However, the side effect of the fentanyl was to leave Ryan in a near comatose state, unable to interact with his loved ones. In the interim, **Ryan’s father and co-author of Ryan’s Law, Jim Bartell,** reached out to Heather Manus, RN, President of CNN, and Nurse Heather arranged for Ryan to receive the appropriate cannabis extracts from a legal source to reduce the pain and allow him to be alert and communicative with family and friends during his final days. Unfortunately, the first hospital refused to allow Ryan to use cannabis in their facility. He stayed on this medication until his family could locate and move Ryan to a hospital that would allow him to use cannabis. As a result of using medical cannabis in lieu of fentanyl, within 12

hours Ryan was able to converse and interact with his family normally and spent his last two and half weeks lucid and pain-free with his family and friends. Following this experience, Ryan's father Jim Bartell made it his mission to ensure that no other family would have to navigate this choice for palliative care, losing precious time with their loved one.

Ryan's Law builds on the rights granted to patients through the California voter initiative Proposition 215 in 1996, also known as the Compassionate Use Act which is **similar in substance to Hawaii's medical cannabis law**. The law exempts patients and their designated caregivers from criminal penalties relating to the use, possession, and cultivation cannabis with an oral or written recommendation or approval from a physician. In 2015, the California legislature passed the Medical Cannabis Regulation and Safety Act expanding rights for patients and establishing a state regulated cannabis program.

The US Supreme Court confirmed in 2004 that medical professionals have a legal right to recommend cannabis as a treatment in any state due to protections afforded by the First Amendment to the US Constitution. The court upheld an earlier ruling in *Conant v. Walters* in which the Ninth Circuit Court of Appeals ruled that the federal government could neither punish nor threaten a doctor merely for recommending the use of cannabis to a patient.

While cannabis remains a Schedule I drug, for the past 8 years Congress has added restrictions on federal enforcement though the funding bill for the Commerce-Justice-Science (CJS) prohibiting Justice Department funds from being used to prevent states from implementing medical cannabis laws. Known as the Rohrabacher-Farr or CJS amendment, it first signed into law on December 16, 2014. The courts have largely upheld the CJS Amendment, including Chief Justice Breyer's brother, a federal district judge for the northern district of California, in a case known as *US v. MAMM*.

Ryan's Law also prohibits the smoking of cannabis in healthcare facilities and outlines a series of responsibilities for the facilities. In conjunction with the Ryan's Law Implementation team, I drafted a Guide to help California health care facilities remain in compliance with this new law and offer tools for implementation. The Guide can be found on the Cannabis Nurses Network website, www.cannabisnursesnetwork.com

Nearly 10 years ago as general counsel for the AZCNA we proved to a reasonable degree of scientific certainty that cannabis was safe and effective in the treatment of Post-Traumatic Stress Disorder (PTSD) upon the testimony of physicians, nurses, scientists, and patients. As a result, a judge ordered the Arizona Department of Health Services to add PTSD as an additional qualifying condition under Arizona's MMJ Act. The science is clear because every human being has an endocannabinoid system sometimes referred to as the eCS or the 12th system of the human body and cannabis acts like a nutritional supplement to enhance and improve the eCS system. Medical Cannabis is highly effective for pain relief yet much safer than opiates and does not produce the highly sedative effect of opiates. It allows many terminally ill patients the opportunity to live out their remaining time on earth in the company of their family and friends, essentially pain-free, with a better quality of their precious remaining life.

Founded in 2014, CNN's mission is to ensure education and healthcare for legally qualified patients to use and benefit from safe and legal access to cannabis for therapeutic use, and to advocate on behalf of our nurses and their patients. CNN seeks to advocate for and implement the right of patients to choose cannabis as their medicine of choice, particularly those who are terminally ill. In conjunction with Mr. Bartell, our organization is committed to providing advocacy and support in all states through the passage of Ryan's Law.

Because no person should be deprived of their choice for a natural plant medicine that improves his quality of life before death whether they are at home or in a hospital or healthcare facility, and because no parent should have to watch his child pass without the chance to spend meaningful quality time with him before death...

We urge the Committee to vote in favor of SB 673.

**Respectfully submitted,
Ken Sobel, Esq. for
Cannabis Nurses Network**

Hickey, Erin

From: CMS ROSFOORA <ROSFOORA@cms.hhs.gov>
Sent: Friday, March 19, 2021 10:49 AM
To: Hickey, Erin
Subject: RE: Legislative Meeting Request - California Senator Ben Hueso SB 311

Follow Up Flag: Flag for follow up
Flag Status: Flagged

Good Morning,

I apologize for the delay in our response. CMS and States have received questions from Medicare-participating providers about the impact of marijuana use on their participation in Medicare and Medicaid reimbursement. The Medicare or Medicaid regulations do not address the use of medical marijuana or CBD oil. Surveyors do look at topics such as medication storage, appropriate self-administration of medications, and safe smoking policies, fire safety, etc. – but there is nothing explicitly in the Medicare/Medicaid survey and certification process related to the use of marijuana or CBD oil.

CMS regulations generally require compliance with federal, state, and local laws. CMS would not cite this unless that other body (the authority having jurisdiction-in this case the DOJ) has made an adverse finding.

We are not aware of a provider that has specifically lost funding or been penalized for permitting the use of marijuana or CBD oil; however, there have been citations cited when there has been non-compliance related to the other areas above (fire safety issues in smoking marijuana in a resident/patient room, safe storage, etc.).

Please let us know if you have any questions,

Thank you

From: Hickey, Erin <Erin.Hickey@sen.ca.gov>
Sent: Monday, March 15, 2021 1:55 PM
To: CMS SFCMSFOIA <SFCMSFOIA@cms.hhs.gov>
Subject: Legislative Meeting Request - California Senator Ben Hueso SB 311

Good afternoon,

I work for California State Senator Ben Hueso and am reaching out with a legislative meeting request.

The senator is carrying legislation this year that would require that hospitals and certain types of healthcare facilities in the State of California allow a terminally-ill patient to use medical cannabis for treatment and/or pain relief. The bill number is SB 311 (Hueso): Compassionate Access to Medical Cannabis Act or Ryan's Law: https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=202120220SB311

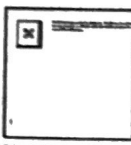
We recently met with the California Department of Public Health, which previously opposed this bill out of the concern that, as the enforcing agency for CMS, they would be required to cite hospitals that permitted this. The California Hospital Association also has an oppose-unless-amended stance due to a possible risk of losing Medicare/Medicaid reimbursement from CMS.

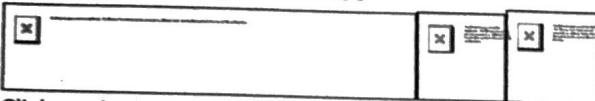
We were hoping to further discuss with your office to see exactly what the process is like when you receive reports from CDPH and what the enforcement action might be if the report is only detailing that the facility is allowing a terminally-ill patient to access cannabis in a state where it is legal and the patient has a valid prescription (also, the hospital does not have to administer or provide it – only not interfere with the patient's use). I'm hoping this doesn't result in a loss of funding but, again, we're just trying to better understand the actual risks involved here. This will greatly help as we decide if and how to amend the bill to ensure that hospitals do not lose funding in our attempt to provide compassionate access to those who most need it.

I've attached the fact sheet for your review. You'll notice we have included a safe harbor clause that allows facilities to suspend compliance based on actions from fed agencies including CMS. We would love to discuss that with you, as well, to see if there are ways to strengthen that.

Are there any days in the coming week(s) that might work for our teams to jump on a Zoom meeting?

Thanks so much!
Erin

 **Erin Hickey**
Communications Director
Office of State Senator Ben Hueso, 40th District
Work: 619-409-7690



Click on the button to receive Senator Hueso's newsletter, and the Twitter and Instagram logos to follow Senator Hueso on social media.



February 6, 2023 at 1:00 pm
Conference Room 225

Senate Committee on Health and Human Services



To: Chair Joy A. San Buenaventura
Vice Chair Henry J.C. Aquino

From: Paige Heckathorn Choy
Associate Vice President, Government Affairs
Healthcare Association of Hawaii

Re: **Opposition**
SB 673, Relating to Medical Cannabis

The Healthcare Association of Hawaii (HAH), established in 1939, serves as the leading voice of healthcare on behalf of 170 member organizations who represent almost every aspect of the health care continuum in Hawaii. Members include acute care hospitals, skilled nursing facilities, home health agencies, hospices, assisted living facilities and durable medical equipment suppliers. In addition to providing access to appropriate, affordable, high-quality care to all of Hawaii's residents, our members contribute significantly to Hawaii's economy by employing over 30,000 people statewide.

Thank you for the opportunity to **oppose** this legislation. We appreciate the intent of this measure, which is to allow terminally ill patients who are registered medical marijuana users to access and use the drug while admitted into an inpatient setting. Only one state (California) has passed a law allowing this, and it has just recently gone into effect. We believe that the concerns raised by healthcare facilities in the state—namely, that allowing the use of medical marijuana in inpatient settings—could run afoul of federal law and regulations and could affect reimbursements from programs such as Medicare. Many contracts that facilities have with private insurers also contain requirements limiting controlled substance use in facilities.

This measure is problematic for hospital settings, where outside medications are generally not allowed to be brought in and used by patients. However, the bigger unresolved questions lie with how this policy will be implemented in nursing homes and hospices. It could be very difficult to manage this policy for congregate living settings such as nursing homes and, given the definition of terminally ill, may require a facility to manage up to a year of security and compliance issues. Further, while many hospices may allow the use of medical marijuana at home, inpatient hospices must meet different demands and requirements.

While there are some exceptions built into this measure, we would suggest that more time is needed to see how this policy is ultimately implemented and worked out in the state where it was passed, and would ask that this measure not move forward until we better understand the potential consequences of this policy.

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



February 6, 2023

Chair, Sen. Joy San Buenaventura
Vice Chair, Sen. Henry J.C. Aquino
Senate Committee on Health & Human Services

LATE

TESTIMONY IN SUPPORT OF SB 673 – RELATING TO MEDICAL CANNABIS

Dear Chair, Vice Chair, and Members of the Health and Human Services Committee:

Aloha, my name is DeVaughn Ward and I am the senior legislative counsel at the Marijuana Policy Project ("MPP") - the largest marijuana policy reform organization in the United States. As you may know, MPP has been working to improve marijuana policy for more than 25 years.

I am here today to testify in support of **SB 673 – Relating to Medical Cannabis**

MPP appreciates the opportunity to comment on SB 673. Medical cannabis can benefit the terminally ill patient in several ways. One benefit of medical cannabis recognized by many healthcare providers is its ability to offer pain relief. In the case of terminally ill patients, morphine and fentanyl are frequently prescribed to help manage pain. However, a common side effect of these drugs is they typically cause patients to exist in a semi-comatose state. Medical cannabis can be used as an alternate or complementary treatment option to these medications, providing gentler side effects that allow terminally ill patients to stay awake and spend more of their remaining precious moments with family and friends.

Additional benefits of medical cannabis include its ability to increase appetite and reduce anxiety. Particularly for terminally ill patients, even a small meal or a bit of soup can help the patient be more comfortable. Anxiety experienced by terminally ill patients can be relieved at least for a short while by medical cannabis. Other important benefits of medical cannabis include its effectiveness in reducing nausea and vomiting.

We urge the committee to support this compassionate, common-sense measure to allow terminally ill patients to access cannabis in health care facilities for palliative and end of life care.

Mahalo to the Chairs and members of the committee for your time and attention. If you have any questions or need any additional information, I would be happy to help answer them and can be reached at the email address below.

Sincerely,
DeVaughn Ward, Esq.
Senior Legislative Counsel
Marijuana Policy Project
Honolulu, HI
dward@mpp.org



To Senator Joy A. San Buenaventura, Chair
Senator Henry J.C. Aquino, Vice Chair
Members of the Senate Committee on Health

Fr: Randy Gonce, Executive Director of the Hawaii Cannabis Industry Association

Re: **Testimony In Support of Senate Bill (SB) 673**

RELATING TO MEDICAL CANNABIS.

Allows health care facilities to permit terminally ill patients to use medical cannabis under certain conditions.

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

The Hawai'i Cannabis Industry Association is the trade association for the state's licensed medical cannabis dispensaries. HICIA **supports SB 673** as it expands necessary access for our most vulnerable patients.

Thank you for the opportunity to testify.



February 5, 2023

Dear Honorable Chair, Vice Chair, and Distinguished Members of the Committee

My name is Heather Manus, RN and I represent nearly 5000 nurses who are members of the Cannabis Nurses Network, including nurses working and residing in Hawaii.

I am writing to express our strong support for [SB 673](#): Compassionate access; health care facility; terminally-ill patients; condition of use; otherwise known as Ryan's Law. This legislation will provide relief, compassion and dignity to Hawaiians during the most vulnerable time of their lives.

Despite Hawaii's approval of medical cannabis use for adults and children, and the very real prospect of legalizing the adult use of cannabis, Hawaii patients are currently unable to continue taking medical cannabis as part of their treatment plan while in the hospital – even if they possess a valid physicians' recommendation.

SB673 seeks to close that gap by allowing those who most need compassion at the end of life to have access to medical cannabis in an in-patient setting. The bill would authorize a healthcare facility to reasonably restrict the manner in which a patient stores and uses medical cannabis to ensure the safety of other patients, guests, and employees of the healthcare facility. It does not apply to patients receiving emergency care, and smoking and vaping cannabis is expressly prohibited.

For too long, Hawaiians receiving treatment in healthcare facilities have been denied access to medical cannabis-related treatment methods, despite research demonstrating it to have innumerable benefits. As a result, individuals have been subjugated to unnecessary trials of pain and suffering. SB673 is a simple yet critical step, which will have an abundance of benefits to ensure access to compassion and pain management for the most vulnerable Hawaiians.

For these reasons, Cannabis Nurses Network is proud to join you in support of [SB 673](#).

Sincerely,

Heather Manus, RN
Cannabis Nurses Network, President

SB-673

Submitted on: 2/5/2023 8:41:48 PM

Testimony for HHS on 2/6/2023 1:00:00 PM

LATE

Submitted By	Organization	Testifier Position	Testify
Tai Cheng	Testifying for Aloha Green Holdings Inc.	Support	Written Testimony Only

Comments:

Aloha Green Apothecary supports the intent of this bill to provide cannabis rights to terminally ill patients.

Chair San Buenaventura and Honorable Committee Members,

My name is Jim Bartell.

I am the father of Ryan Bartell and sponsor of SB673 (Ryan's Law); The Compassionate Access to Medical Cannabis in Health Care Facilities Act.

Ryan and his wife Katie both worked in special education with mostly autistic children. To do that job takes not only special skills, but also great patience and compassion. Ryan had those qualities and was very effective with his students.

They have a son, Conor, who is now thirteen years old.

On March 1st 2018, Ryan called me and my wife, to tell us that he had been diagnosed with stage four pancreatic cancer and had only a few weeks to live. I couldn't believe what I was hearing and my heart sank and the tears swelled.

He was in the hospital on his birthday, March 9th, and he died on April 21st; just 7 weeks after being diagnosed.

What happened between march 1st and april 21st 2018 is why this bill is before you today.

In the first hospital, Ryan was given morphine and other opioids for pain relief, but those weren't strong enough, so they added fentanyl, which is one hundred times more potent than morphine. The result was, he was asleep most of the time. During one of his rare waking moments he said he didn't want to spend his last few weeks sleeping. He told me he wanted to be able to spend time with Katie and Conor, his parents, brother and sister and his many friends. We suggested medical cannabis as an alternative to the fentanyl, which he agreed to. We had a medical cannabis chemist create cannabis medicines for pain relief. However, we were informed by the hospital that it was their policy was not to allow cannabis in the hospital.

The irony of that policy is that fentanyl and other opioids that kill 125,000 people a year in the u.s. are ok to have in the hospital; but not medical cannabis, which has never killed anyone!

After four weeks on fentanyl we were able to transfer him to another hospital that allowed medical cannabis.

Because he couldn't swallow anything, not even water, the chemist created a medical cannabis spray administered under the tongue for pain relief.

The result was amazing!

Awake and alert during the day, he was able to have conversations with Katie and Conor, me and my wife, his brother and sister and other family and friends.....without pain!

Instead of being asleep from the fentanyl, the medical cannabis provided him with a quality of life for his final two and a half weeks; which allowed him to have much needed conversations with his family; and time to reminisce and laugh with his many friends who came to visit.

Every terminally ill patient should be able to have the same opportunity as Ryan; to spend their final days with as much quality and dignity as possible. They are dying.....why wouldn't we want that for them?

In conclusion, the happiest moments in my life were the first time I held each of my three children when they were born.

The saddest moment in my life was holding Ryan's hand as he took his last breath.

My hope is that my saddest moment will be made less painful by ensuring that Ryan's Law will allow thousands of other terminally ill patients to live their final days with the quality and dignity that he was able to experience.

Please support HB673 (Ryan's law). Thank you.

Respectfully,

Jim Bartell

SB-673

Submitted on: 2/6/2023 12:12:36 AM
Testimony for HHS on 2/6/2023 1:00:00 PM

LATE

Submitted By	Organization	Testifier Position	Testify
Ruth Love	Individual	Support	Written Testimony Only

Comments:

Anything that improves comfort care for patients and eases the dying process for both patients and family is a great idea.

ER nurse 35 years, retired

Thank you, Mrs Ruth Love

SB-673

Submitted on: 2/4/2023 7:52:47 AM

Testimony for HHS on 2/6/2023 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
dakin retzlaff	Individual	Support	Written Testimony Only

Comments:

Patients should be able to use state legal medicine.

LATE

SB-673

Submitted on: 2/6/2023 12:22:29 AM

Testimony for HHS on 2/6/2023 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
pahnelopi mckenzie	Individual	Support	Written Testimony Only

Comments:

I support SB 673 and the human right to use plant medicine in ways of healing, resting, and nourishment. Cannabis has been used to ease so many health issues through time.

LATE

SB-673

Submitted on: 2/5/2023 1:43:33 PM

Testimony for HHS on 2/6/2023 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Will Caron	Individual	Support	Written Testimony Only

Comments:

I support SB673.

SB-673

Submitted on: 2/6/2023 6:23:24 AM

Testimony for HHS on 2/6/2023 1:00:00 PM



Submitted By	Organization	Testifier Position	Testify
David Shizuma	Individual	Support	Written Testimony Only

Comments:

I am writing in support of SB673.

Cannabis is already an option to medically treat patients with pain, anxiety, and other conditions that are untreatable by mainstream medicine. Terminally-ill patients are those with conditions that cannot be treated. These patients should be allowed access to medical cannabis as an option to ease their pain, anxiety, or other conditions, if it helps. This option should be allowed to terminally-ill patients.



LATE

To: Senator Joy San Buenaventura, Chair
Senator Henry J.C. Aquino, Vice Chair
Members of the Senate Committee on Health

Fr: Bill Jarvis, Chief Executive Officer of Noa Botanicals

Re: Testimony **In Support** of **Senate Bill (SB) 673**

RELATING TO MEDICAL CANNABIS.

Allows health care facilities to permit terminally ill patients to use medical cannabis under certain conditions.

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

Noa Botanicals is one of the three licensed medical cannabis dispensaries on Oahu and we **support SB 673**. Providing medical cannabis to terminally ill patients is a humane and viable alternative to prescription drugs.

Thank you for the opportunity to testify.

Best,

Bill Jarvis
CEO
Noa Botanicals

SB-673

Submitted on: 2/6/2023 10:54:56 AM

Testimony for HHS on 2/6/2023 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Wendy Gibson-Viviani	Individual	Support	Written Testimony Only

Comments:

TO: REGULAR SESSION OF 2023 COMMITTEE ON HEALTH AND HUMAN SERVICES

Senator Joy A. San Buenaventura, Chair, Senator Henry J.C. Aquino, Vice Chair

FROM: Wendy Gibson-Viviani RN

LATE

RE: SB673 – **In STRONG SUPPORT**

HEARING: Saturday, February 6, 2023, at 1:00 pm in Conference Room 225 & Videoconference

Dear Honorable Chair, SanBuenaventura, Vice Chair Aquino, and Members of the Committee,

My name is Wendy Gibson-Viviani and I have been a Medical Cannabis Nurse Educator in

Hawaii for eight years. I am also a member of the Cannabis Nurses Network (CNN), a group who

assisted with passing a bill that is similar to SB673, called **“Ryan’s Law, in California**, in 2021.

CNN worked with Ryan’s dad, Jim Bartell, to pass a law that allows terminally ill patients to

continue using their cannabis medicines, should they be admitted to certain hospitals or other healthcare facilities.

I feel that NO terminally ill patient should be deprived of their pain and anti-anxiety medicines, especially when they need them the most -- and that is currently what healthcare facilities do.

I recently met Ryan's father and he explained how horrifying it was to witness Ryan's suffering --after the hospital refused to allow him use of his cannabis medicines. Jim had to locate a hospital who would allow it and have Ryan flown there -- to Washington state. Jim has become a patient advocate and I am standing with him and others who are trying to pass similar bills in other states.

Please consider passing SB673, to allow terminally ill patients access to their non-smokable medicines in certain healthcare facilities.

More information can be found at the Cannabis Nurses Network website under the **Ryan's Law**

Action Center <https://www.cannabisnursesnetwork.com/ryans-law-action-center/>

They also have a Healthcare facility guide to implementing the law

<https://us-ms.gr-cdn.com/getresponse-QzfLx/documents/83f72075-7ef6-4658-b9ef69019ef81306.pdf>

Thank you for the opportunity to provide testimony on this very important matter.

Please do contact me if you have any questions or concern.

Wendy Gibson-Viviani RN/BSN

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