



STATE OF HAWAII
DEPARTMENT OF HEALTH
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Written
Testimony Only

**Testimony in OPPOSITION to SB2461 SD1
RELATING TO MEDICAL CANNABIS**

SENATOR JARRETT KEOHOKALOOLE, CHAIR
SENATE COMMITTEE ON COMMERCE AND CONSUMER PROTECTION

SENATOR KARL RHOADS, CHAIR
SENATE COMMITTEE ON JUDICIARY

Hearing Date: 02/23/2024

Room Number: 229

1 **Fiscal Implications:** N/A.

2 **Department Testimony:** The Department of Health (department) Office of Medical Cannabis
3 Control and Regulation (OMCCR) respectfully OPPOSES SB2461 SD1 which proposes to
4 facilitate the administration of the medical cannabis dispensary program and resolve matters that
5 have arisen since the passage of Act 309, Session Laws of Hawaii 2022, and Act 108, Session
6 Laws of 5 Hawaii 2023. The bill proposes amendments to Section 329D-6, HRS, and Section
7 329D-10, HRS.

8 The amendment to Section 329D-6 will remove the discretion that the Office of Medical
9 Cannabis Control and Regulation (OMCCR) has in regard to dispensary to dispensary sales.
10 OMCCR OPPOSES this amendment as the rules regulating the dispensary to dispensary sales
11 were enacted in July of 2023 and addressed the needs for this type of sales at that time. Since the
12 establishment of the new interim rules in July of 2023 ten dispensary to dispensary sales have
13 been conducted, and two sales are currently pending. Half of all the medical cannabis licensees
14 have purchased from other licensees via these rules and half of the medical cannabis licensees
15 have sold to the other licensees.

1 The department respectfully OPPOSES the amendment to section 329D-10 subsection (d) to
2 require that "All rules adopted pursuant to this section shall be adopted no later than nine months
3 after a product is permitted to be manufactured and distributed pursuant to subsection (a). If no
4 rules are adopted, dispensaries may distribute medical cannabis products in compliance with this
5 chapter." Specifying a time limit for rulemaking is not only unfair to the program, but doing so
6 could jeopardize the health and safety of patients and the public.

7 OMCCR is responsible for the registration of qualifying patients for medical use of cannabis;
8 licensing and inspecting dispensary operations and medicinal cannabis products; and, since May
9 2023, hemp processor registration and regulation of hemp-cannabinoid consumer products. The
10 legislature provided OMCCR with four (4) additional positions to support the newly acquired
11 hemp responsibilities, but funding for these does not begin until FY25. As such, all the duties
12 pertaining to the dispensary licensing and hemp regulation is being managed by the Medical
13 Cannabis Dispensary Licensing Section (MCDLS).

14 MCDLS has a total of seven (7) staff. A Program Specialist VI (Supervisor), an Office Assistant
15 IV, and five (5) Surveyors. Together these staff are responsible for inspecting each of 37
16 licensed facilities, reviewing product manufacturing and packaging, overseeing compliance with
17 laboratory testing, inventory tracking, security requirements, investigating patient complaints,
18 responding to inquiries, and open records requests, and revising Chapter 11-850, HAR. In
19 addition, these staff are now also responsible for reviewing and approving requests for
20 dispensary-to-dispensary sales, registering hemp processors, and revising Chapter 11-37, HAR.
21 Act 108 SLH 2023 was an omnibus medical cannabis bill that included numerous changes to
22 Chapter 329D, HRS. It provided for a "waiting room" area at retail dispensaries to support
23 patient access. It added pre-rolled cannabis flower products as an allowed manufactured product
24 form. It allowed retail locations to have two signs instead of only one. It provided for dispensary-
25 to-dispensary sales. It placed a 2.5% limit on annual increases to license renewal fees. It
26 authorized the department to approve colored lettering on product packaging. It authorized the
27 department to allow construction and maintenance workers to enter dispensary facilities without
28 a background check with proper supervision. It clarified the fining authority for violations. And

1 it required the department to conduct an education and outreach program. Most of these changes
2 require revision of Chapter 11-850, HAR.

3 In addition, Act 263 SLH 2023 was an omnibus hemp bill that included numerous changes to
4 Chapter 328G, HRS. It clarified that Chapter 328G applies only to the processing of hemp
5 biomass into certain forms and their sale and distribution. It added new definitions, including a
6 restrictive definition of "Manufactured hemp product" which is currently preventing the
7 department from approving new product forms. It changed the registration of hemp processors to
8 a permit system and added a requirement that the department conduct background checks for
9 applicants who are not USDA hemp cultivator license holders. It added additional standards for
10 hemp crude extract and manufactured products. And, most importantly, it specified that no
11 manufactured products or crude extract could be sold without rules pursuant to Chapter 328G.

12 Despite these challenges, MCDLS successfully completed an amendment of Chapter 11-850 and
13 submitted it to the Office of the Lt. Governor for consideration and approval on July 14, 2023,
14 just thirteen calendar days after the July 1, 2023 effective date of Act 108. The revised rules
15 became effective on August 7, 2023. The amendments included: establishing standards for
16 dispensary-to-dispensary sales of cannabis and manufactured cannabis products; reducing the
17 required number of employees for transport of cannabis and manufactured cannabis products
18 from two employees to one employee; clarifying transport requirements for inter-dispensary
19 shipments; applying the THC dosage and per package limits in place for manufactured products
20 to edible products; allowing dispensary licensees to post up to two signs; establishing standards
21 for entry of infrastructure workers to dispensary facilities; and clarifying violation fees.

22 MCDLS prioritized the implementation of the dispensary-to-dispensary sales because the
23 dispensary licensees had emphasized that these were needed and because the program believes
24 that this would greatly benefit patients by giving patients a wider variety of product options,
25 previously limited by what the dispensaries on their island produce, and by streamlining
26 manufacturing, result in lower product costs. MCDLS chose to defer implementing pre-rolls to
27 provide adequate time to research the various considerations to best serve patients as well as

1 protect their health. These include what type of paper to allow, the weight content, requiring a
2 filter, allowed additives, flavorings, etc. This research has been ongoing since Act 108 became
3 effective and would have significantly delayed implementation of dispensary-to-dispensary sales.
4 Dispensary licensees have been informed of these decisions from the start.

5 Immediately after the revised Chapter 11-850 amendments were submitted for approval,
6 MCDLS shifted to revisions of Chapter 11-37, HAR. As stated above, without revised rules,
7 hemp processors would not be able to apply for or renew processing permits and existing
8 processors are unable to sell crude extract. The draft revised rules have been completed and are
9 currently being reviewed. We are hopeful the rules will be ready to submit for approval by the
10 end of February, at which time we will return to another revision of Chapter 11-850 to allow for
11 manufacturing of pre-rolls.

12 OMCCR fully understands the legislature's interest is having legislative changes implemented
13 quickly. However, OMCCR has limited resources. While MCDLS conducts all the research into
14 the rule changes, we must pay a staff person from another program 40 hours of overtime per
15 month to convert everything into Ramseyer format, cross-check for potential interaction or
16 impact with other rules, and prepare and submit the revision request documents. This is the only
17 way OMCCR was able to complete four (4) revisions of Chapter 11-850 over the past two years
18 while ensuring our function of maintaining patient safety, product safety, and public safety as
19 guiding principles. Placing a strict time limit for rulemaking on the program will require us to
20 prioritize rulemaking over these other program priorities to the detriment of patients and the
21 public. OMCCR asks that SB2461 be deferred.

22 Thank you for the opportunity to testify.

23 **Offered Amendments:** None

24

To: Senator Jarrett Keohokalole, Chair
Senator Carol Fukunaga, Vice-Chair
Members of the Commerce and Consumer Protection Committee

To: Senator Karl Rhoads, Chair
Senator Mike Gabbard, Vice-Chair
Members of the Judiciary Committee

Fr: TY Cheng, Chairman, Hawaii Cannabis Industry Association

Re: Testimony **In SUPPORT of Senate Bill (SB) 2461 SD1**

RELATING TO MEDICAL CANNABIS.

Amends the circumstances under which medical cannabis may be transported by and between dispensaries. Requires the Department of Health to adopt rules.

Dear Chairs, Vice-Chairs, and Members of the Joint Committee:

The Hawaii Cannabis Industry Association (HICIA) is an industry group representing medical cannabis dispensary licensee interests in Hawaii. HICIA **SUPPORTS SB2461 SD1** as this bill may affect the medical cannabis dispensary program by expediting wholesale transactions between existing medical cannabis dispensary licensees and allowing the sale of cannabis products (i.e. prerolls) previously approved by legislators.

The Department of Health (the "DOH") has been reluctant to support the medical cannabis program. The DOH did not implement rules in accordance with the legislative wishes of lawmakers and previously passed laws. Instead, the DOH has either implemented rules which are not within the spirit of the law (i.e. requiring conditions on when and why a wholesale transaction between licenses may occur); or have wholly disregarded newly passed laws (i.e. leaving out rules on allowing cannabis preroll sales and allowing members of the public to enter a dispensary lobby when assisting a disabled 329 patient). HB1952 addresses the glaring unilateral additions and omissions by requiring the DOH to issue rules in a timely manner. In a previous House testimony on this companion bill (HB1952), the DOH admitted to an institutional culture of anti-smoking which prevented them from issuing rules to allow for the manufacture and sale of cannabis prerolls even though the legislature amended the law to allow for prerolls as a manufactured cannabis product in 2022.

There are 5 other US States with medical cannabis sales only programs that have rules that allow for the sale and manufacture of cannabis prerolls. Previously, I have provided preroll rules from medical-only markets such as Florida, Oklahoma, and South Dakota that that require lab testing of finished products in order to restrict tobacco and flavor additives.

The DOH is an administrator and should not pick and choose what laws to implement when such laws are duly ratified because it does not agree with the policies of the legislative branch.

Thank you for the opportunity to testify. I am available over Zoom for any questions.

Aloha,

TY Cheng



SanHi

GOVERNMENT STRATEGIES

A LIMITED LIABILITY LAW PARTNERSHIP

DATE: February 21, 2024

TO: Senator Jarrett Keohokalole
Chair, Committee on Commerce and Consumer Protection

Senator Karl Rhoads
Chair, Committee on Judiciary

Submitted Via Capitol Website

FROM: Jena Matila

RE: **S.B. 2461, S.D. 1 – Relating to Medical Cannabis**
Hearing Date: Monday, February 23, 2024 at 10:15 a.m.
Conference Room: 229

Dear Chair Keohokalole, Chair Rhoads, and members of the Joint Committees:

We submit this testimony on behalf of Cure Oahu in **support** of S.B. 2461, S.D. 1. Cure Oahu is a vertically integrated licensed dispensary that has been operating in the State of Hawaii since 2018, with two retail locations in the Kapahulu and Kapolei areas.

S.B. 2461, S.D. 1, amends the dispensary program law to resolve matters that have arisen since the passage of Act 309 (SLH 2022) and Act 108 (SLH 2023). Specifically, the bill seeks to allow dispensary to dispensary sales to move forward and allow for the sale of cannabis products approved by the Legislature by putting a timeline on rulemaking.

Despite the legislative intent of Acts 309 and 108 to allow wholesale between dispensaries more freely, wholesale currently occurs on an emergency basis with an under 30 days request and approval process, or on a prove of need basis requiring over 30 days request and approval process. Current rules also give the Department of Health full discretion to reject requests with no specific timeline to respond. This limited wholesale approach impairs dispensaries' ability to do future planning, share manufacturing capabilities or specialize in equipment or products without facing significant risk of potential wholesale request rejections. Wholesale expands patient access to a variety of formulations, products and strains without sacrificing safety and consistency, and should be more widely supported. On a related matter, the sale of pre-rolled cannabis flower products was authorized under Act 108, but the Department has not engaged in rulemaking for the product since the law's passage. As a result, patients do not have access to this option. S.B. 2461, S.D.1, would address these issues by explicitly stating a dispensary may purchase

cannabis and manufactured cannabis products from another dispensary, and placing a time limit on rulemaking to allow distribution of products in a timely manner.

Thank you for the opportunity to submit testimony in support of this bill.

LATE

SB-2461-SD-1

Submitted on: 2/22/2024 12:27:39 PM

Testimony for CPN on 2/23/2024 10:15:00 AM

Submitted By	Organization	Testifier Position	Testify
Ann Chung	Testifying for Pono Life Maui	Support	Written Testimony Only

Comments:

On behalf of Pono Life Maui, one of eight medical cannabis dispensaries licensed by the Dept of Health to provide safe, legal access to medical cannabis for Hawai'i-registered patients, we write in SUPPORT of SB2461.

We strongly support SB 2461 that will improve the dispensary program law to resolve matters that have arisen since its passage. These amendments will bill allow dispensary to dispensary sales to move forward and allow for the sale of cannabis products (such as pre-rolled flower cannabis products) approved by the Legislature by putting a timeline on rulemaking.



HawaiianEthos

LATE

Date: January 30, 2024

To: Representative David Tarnas, Chair Committee on Judiciary and Hawaiian Affairs
Representative Cedric Gates, Chair Committee on Agriculture and Food Systems

Fr: Noah Phillips - Hawaiian Ethos

Re: Testimony **In STRONG Support of House Bill (HB) 1952**

RELATING TO MEDICAL CANNABIS Amends the circumstances under which medical cannabis may be transported by and between dispensaries. Requires the Department of Health to adopt rules.

Dear Chair Tarnas, Chair Gates, and Members of the Joint Committees:

Hawaiian Ethos **supports HB1952** as an important bill for enhancement of the State's medical cannabis dispensary program. Hawaiian Ethos is a vertically integrated licensed dispensary operating in the State of Hawai'i since 2018, with three retail locations in the Hilo, Kona, and Waimea areas on the Island of Hawai'i.

We strongly support the non-discretionary ability to wholesale amongst the other medical cannabis licenses. Allowing for the wholesale of cannabis products between licensees allows providers to greatly increase the necessary product diversity that patients have access to in the licensed dispensaries of their area. As the only provider of completely solventless medical cannabis products, Hawaiian Ethos is uniquely positioned to provide these clean solventless options to patients across all of the Hawaiian islands. All medical cannabis patients' needs are different and so too are their needs for different product delivery methods and formulations of their medicine i.e. Advil, Tylenol, or Aleve. In order to create a healthy cannabis marketplace where all patients have the choice to select a product most suited to their unique medical needs, licensees must be able to more freely share in the manufacturing proficiencies of each other, as the required manufacturing of these different product types are often costly and difficult for any single company to undertake alone.

Thank you for the opportunity to testify.

Noah Phillips, on Behalf of Hawaiian Ethos



Akamai Cannabis Consulting

3615 Harding Ave, Suite 304
Honolulu, HI 96816

**TESTIMONY ON SENATE BILL 2461 SD1
RELATING TO MEDICAL CANNABIS**

By
Clifton Otto, MD

Senate Committee on Commerce and Consumer Protection
Senator Jarrett Keohokalole, Chair
Senator Carol Fukunaga, Vice Chair
and
Senate Committee on Judiciary
Senator Karl Rhoads, Chair
Senator Mike Gabbard, Vice Chair

DECISION MAKING
Friday, February 23, 2024; 10:15 AM
State Capitol, Room 229 & Videoconference

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

The department needs to have discretion over wholesaling between dispensaries, because wholesaling cannabis between certain islands violates interstate commerce. The department should be able to determine the extent to which it will participate in these activities, to include not participating at all.

The same should hold true for issuing rules for the sale of unhealthy dispensary products such as pre-rolled marijuana cigarettes (prerolls). The department should not be forced to adopt rules that violate the department's mission to protect the public health by promoting a product that is intended to be smoked.

In addition, if a patient does not have the manual dexterity to roll a joint, then they probably also don't have the manual dexterity to safely hold a joint, which means that Prerolls can be a [fire hazard](#) as well as a [health risk](#).

The Legislature should correct this error by removing Prerolls from the allowed product list for patients and reserve this product for an adult use program that is administered by a different department. The use of a dry herb vaporizer is the preferred inhalation method for the medical use of cannabis and is much easier to hold than a joint.

Please make the following amendments to this bill:

SECTION 2. Section [329D-6](#), Hawaii Revised Statutes, is amended by amending subsection (r) to read as follows:

"(r) A dispensary may purchase cannabis and manufactured cannabis products from another dispensary. The department [~~may~~] [~~shall~~] may authorize a dispensary to purchase cannabis and manufactured cannabis products from another dispensary in a manner prescribed by the department by rules adopted pursuant to section [329D-27](#); provided that:

~~[(1) The purchasing dispensary establishes to the department's satisfaction that:~~

~~(A) The purchase is necessary to ensure that qualifying patients have continuous access to cannabis for medical use; or~~

~~(B) The cannabis and manufactured cannabis products are for medical, scientific, or other legitimate purposes approved by the State;~~

~~-(2)]~~ (1) The selling dispensary may transport no more than eight hundred ounces, or other amounts with prior approval by

the department, of cannabis or manufactured cannabis products to the purchasing dispensary within a thirty-day period;

~~[(3)]~~ (2) The cannabis and manufactured cannabis products are transported between the dispensaries for medical~~[7]~~ sales, scientific~~[7]~~ use, or other legitimate purposes approved by the State; and

~~[(4)]~~ (3) Nothing in this subsection shall relieve any dispensary of its responsibilities and obligations under this chapter and chapter 329 with the understanding that state law and its protections do not apply outside of the jurisdictional limits of the State."

SECTION 3. Section 329D-10, Hawaii Revised Statutes, is amended as follows:

1. By amending subsection (a) to read:

"(a) The types of medical cannabis products that a dispensary may ~~[be manufactured and distributed]~~ manufacture and distribute pursuant to this chapter shall be limited to:

- (1) Capsules;
- (2) Lozenges;
- (3) Pills;
- (4) Oils and oil extracts;
- (5) Tinctures;
- (6) Ointments and skin lotions;
- (7) Transdermal patches;

(8) Pre-filled and sealed containers used to aerosolize and deliver cannabis orally or by inhalation, such as an inhaler, nebulizer, or device that provides safe pulmonary administration; provided that:

(A) Containers need not be manufactured by the licensed dispensary but shall be filled with cannabis, cannabis oils, or cannabis extracts manufactured by the licensed dispensary or purchased from another dispensary pursuant to section 329D-6(r); but shall not contain nicotine, tobacco-related products, or any other non-cannabis derived products; and

(B) For devices that provide safe pulmonary administration:

(i) The heating element of the device, if any, shall be made of inert materials such as glass, ceramic, or stainless steel, and not of plastic or rubber;

(ii) The device shall be distributed solely for use with single-use, pre-filled, tamper-resistant, sealed containers that do not contain nicotine or other tobacco products;

(iii) There shall be a temperature control on the device that is regulated to prevent the combustion of cannabis oil; and

(iv) The device need not be manufactured by the licensed dispensary;

~~[(9) Pre-rolled cannabis flower products, as specified by the department];~~

~~(10)~~ (9) Edible cannabis products, as specified by the department; and

~~(11)~~ (10) Other products as specified by the department."

2. By amending subsection (d) to read:

"(d) Any medical cannabis product manufactured and distributed pursuant to this chapter shall be regulated and approved by the department and meet all requirements of rules adopted pursuant to this chapter; provided that the department shall establish requirements for child-resistant packaging and accurate and proper labeling. All rules adopted pursuant to this section shall be adopted no later than nine months after a product is permitted to be manufactured and distributed pursuant to subsection (a)."

SECTION 4. Statutory material to be repealed is bracketed and stricken. New statutory material is underscored.

SECTION 5. This Act shall take effect on July 1, 3000.

