



STATE OF HAWAII
DEPARTMENT OF HEALTH
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**Testimony in SUPPORT of HB1217 HD2
RELATING TO MEDICAL CANNABIS**

REP. KYLE T. YAMASHITA, CHAIR
HOUSE COMMITTEE ON FINANCE

Hearing Date: Thurs., Feb. 23, 2023 Room Number: 308

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

2 **Department Testimony:** The Department of Health (DOH) appreciates and supports this
3 measure amending section 329-41, HRS, various sections of part IX, chapter 329, HRS, and
4 section 329D-2, HRS which strengthens the integrity of the medical cannabis law and provides
5 clear parameters regarding the medical use of cannabis for qualifying patients, primary
6 caregivers, qualifying out-of-state patients, or caregivers of qualifying out-of-state patients.

7 The department appreciates the HD2 amendment to section 4 which exempts from the limitation
8 against more than five qualifying patients using any location to cultivate cannabis those
9 qualifying patients who obtain a written exemption from DOH. The department acknowledges
10 that there may be extraordinary circumstances where allowing more than five patients to use a
11 cultivation location would be beneficial and reasonable.

12 Thank you for the opportunity to testify.

13 **Offered Amendments:** N/A.

HB-1217-HD-2

Submitted on: 2/21/2023 3:49:31 PM

Testimony for FIN on 2/23/2023 1:30:00 PM

Submitted By	Organization	Testifier Position	Testify
Alex Wong	Kauai Farm Planning	Oppose	Written Testimony Only

Comments:

Aloha e State of Hawaii Representatives,

No law should limit how much food and medicine you can legally grow for your own community.

PLEASE READ THE FOLLOWING CAREFULLY:

RE: HB1217 and HD1

1. What is the legal reason and justification for limiting the number of qualifying patients on a single location to only five (5)? Access to a secure, discreet, privately owned property on an island is very difficult, especially in dense urban development areas such as nearly all of Oahu and all the residential zoned areas on Kauai, Maui, and Hawaii.

Medical cannabis is farming and if agriculture zoned land is available to provide the space, infrastructure, privacy, remoteness, and cooperative community-based cultivation and shared responsibility of medical self-determination, why would the State of Hawaii make it illegal for more than five (5) qualifying patients from growing, propagating, and flowing their medical plants together? Many hands make light work, and division of labor is a fundamental economic principle of efficiency and minimizing labor costs. Costs that are important to consider when access to affordable medical cannabis in Hawaii is an ethical concern with regards to the not so affordable alternatives (i.e. dispensaries).

Financial and social equity is the essential problem here. The right for a community to grow its own medicine shall not be infringed upon. As long as one (1) qualifying patient is growing no more than ten (10) cannabis plants per their respective medical registration number/card, it should not matter if those plants are grown next to forty (40) other plants, or two-thousand (2,000) other plants. Keep in mind, not all cannabis plants counted will be in the flowering phase. Many of the counted plants will be in other various phases of the growth cycle (cutting, seedling, vegetative state). If not on agriculture zoned land, then where else can Hawaii’s qualifying patients living in residential areas cultivate their medicine? This is not a rhetorical question.

2. Who exactly do the authors of this bill suspect will be growing “medical cannabis” besides “qualifying patients, qualifying out-of-state patients, their authorized primary

caregivers, or medical cannabis dispensaries”? Clearly the authors of this bill are attempting to prevent certain individuals from cultivating medical cannabis. Who is it? This is not a rhetorical question.

3. Who exactly is going to enforce the “misapplication of the medical cannabis” in question?

The Department of Health? The Police? Who is going to fund this extra work to be required from either Department of Health and/or local law enforcement to “conduct onsite inspections to verify a person’s compliance”? Hawaii’s tax paying residents? The dispensaries? This is not a rhetorical question.

4. And who exactly is going to be the authority on executing “searches and seizures”?

The Department of Health? The Police? Who is going to fund this extra work to be required from Department of Health and/or local law enforcement? Hawaii’s tax paying residents? The dispensaries? This is not a rhetorical question.

5. “No person shall mischaracterize or disguise transactions arising out of the production, manufacture, sale, or distribution of cannabis intended for medical use as another type of compensation or expense.” Medical cannabis cultivation (indoor and outdoor) in Hawaii is farming. It requires physical labor, the ability to lift over 50 lbs, stand and sit for long periods of time, and the physical and mental capacity to regularly and consistently keep living plants alive. The expectation that the Department of Health expects medical patients with chronic or terminal illness, or debilitating conditions to successfully cultivate and process their own medicine over the span of 6 to 9 months is both ridiculous and callous. The expectation that these medical patients can afford to just go to the dispensary and pay \$400 to \$500 per ounce of flower is equally ridiculous and callous.

Medical cannabis cultivation, like all agriculture in Hawaii, has a high cost upfront and a very slow ROI (Return On Investment). Expenses include but are not limited to: the lease agreement for land and space to register the controlled grow site, electricity, water, infrastructure such as irrigation, greenhouse or tent canopy, soil, compost, fertilizer, pots/grow bags, raised beds, IPM (Integrated Pest Management), seeds, clones, time, and gas/transportation. To expect a caregiver to continuously do all of the work AND pay for the entire cost of all these inputs, and then turn around and give the final product to the patient for FREE is absurd. Especially while the dispensaries are charging \$400 to \$500 per ounce of flower. This is not equal and fair access to affordable medicine.

The State of Hawaii and the Department of Health have no business micromanaging the private arrangements medical patients and caregivers have regarding covering the expenses of their registered grow site and production of their medicine. Unless this committee can provide a valid legal reason for this amendment, we must conclude that the only motive for prohibiting reimbursement or compensation of medical cannabis cultivation outside of the dispensaries is to discourage and dismantle medical caregivers and growers from the 329 law, thereby leaving no other alternative for medical patients (who cannot grow their own medicine) but to buy from the dispensary. This is unethical and an infringement on the right of medical self-determination.

6. “No person shall produce, manufacture, or dispense cannabis or manufactured cannabis products without a dispensary license.” Does this committee understand that not every patient can or wants to consume medical cannabis via smoking cannabis flower? Historically, cannabis extraction and infusion has been a widespread cultural and medical practice that many people from all around the world have adopted and developed over many generations. Criminalizing medical patients and caregivers for processing, or “manufacturing”, cannabis “products” (i.e. RSO, concentrates, edibles, topicals, etc.) for their own medical use is an infringement on equal and fair access to cannabis medicine. The fact that this bill only allows licensed dispensaries to SELL manufactured medical cannabis products to MEDICAL PATIENTS is unethical and frankly, very suspicious. Why would the State of Hawaii allow the dispensaries a legal monopoly over “manufactured” cannabis products AND criminalize anyone else producing other forms of cannabis medicine? This is not a rhetorical question.

HB1217 is clearly aiming to take away medical patients’ rights to grow and produce medicine at any reasonable capacity. It is a blatant attack on all medical cannabis cultivation and relationships that are outside of the dispensaries. The intention and motivation is obvious, the dispensaries want more customers (i.e. medical patients) and are willing to go as far as to change the law to forcibly push more medical patients into their retail stores.

This bill is clearly pushing an agenda for corporate cannabis dispensaries to profit off of more medical patients, and is blatantly forcing more medical patients to buy from the dispensaries by limiting their abilities to cultivate their own plants.

HB1217 bill is fundamentally unethical, and rotten at the root. It needs to be killed, NOT amended, KILLED.

WHERE IS YOUR ALOHA? Respectfully.

DO THE RIGHT THING. Respectfully.

Mahalo nui loa,

**Alex Wong
Kauai Farm Planning**

HOUSE OF REPRESENTATIVES THE THIRTY-SECOND LEGISLATURE
REGULAR SESSION OF 2023
COMMITTEE ON FINANCE
Rep. Kyle T. Yamashita, Chair
Rep. Lisa Kitagawa, Vice Chair



Jason Hanley, Owner of Care Waialua
Oppose HB1217

Care Waialua is a medical cannabis farm, established in 2015, to allow 329 card medical card patients of Hawaii a place to grow their medical cannabis. Care Waialua has been around before the establishment of the dispensary system and sets up a space where 329 card holders can educate themselves through the many uses of cannabis medicine and the different ways to use the plant for its medicinal values.

Care Waialua has grown large because 329 card holders don't have the resources to grow their own medicine at home. Lack of growing space, knowledge of growing, and safety from theft are the major concerns. Care Waialua address these problems by providing a 2-acre secure site, free from theft, and resources such as greenhouses, soil, nutrients, education, etc.

Another large reason Care Waialua has become so popular is over 70% of 329 card holders do not use the dispensaries because cannot afford the dispensary prices or do not like the indoor flower they grow. Most patients prefer sun grown cannabis.

We strongly oppose with H.B. No. 1217, H.D. 1

(2) Restricting the number of qualifying patients who may use the same grow site to cultivate cannabis to five individuals;

Limiting 5 cards to a site will leave many medical patients without medicine. According to DOH records there are approximately over 3000 patients alone using caregiver sites with more than 5

cards on each site. Our site alone has 1000 patients, and that data should be compelling enough to show the legislature that caregiver farms are being utilized. Care Waialua, with an extensive patient membership has never been reported to the DOH for any misdoings or diverting product to the unregulated market.

We strongly oppose with H.B. No. 1217, H.D. 1

(4) To refuse any lawful entry into any premises for any inspection authorized by this chapter.

Currently the DOH has no standard operating procedure on how to conduct a compliance check, also known as a “plant count”. The current law states that no state entity shall enter private property without a search warrant and probable cause to conduct a search. In the past five years DOH and Public Safety have conducted unprofessional compliance checks with a show of force by Public Safety walking on property with guns and operating with a green harvest demeanor. Many patients are willing to allow DOH on their property voluntarily, but Department of Safety should be removed from the Medical Program compliance checks. I am available for further discussion on this topic. It is a safety issue.



SanHi

GOVERNMENT STRATEGIES

A LIMITED LIABILITY LAW PARTNERSHIP

DATE: February 22, 2023

TO: Representative Kyle Yamashita
Chair, Committee on Finance

FROM: Mihoko Ito

RE: **H.B. 1217, H.D. 2 – Relating to Medical Cannabis**
Hearing Date: Thursday, February 23, 2023 at 1:30 p.m.
Conference Room: 308

Dear Chair Yamashita, Vice Chair Kitagawa, and members of the Committee on Finance:

We submit this testimony on behalf of Cure Oahu in **support** of H.B. 1217, H.D. 2. 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.

H.B. 1217, H.D. 2 Relating to Medical Cannabis amends various statutory provisions for the purpose of strengthening the integrity of medical cannabis law. Currently, medical cannabis dispensaries are regulated under HRS Chapter 329D and the individual medical use of medical cannabis is regulated under HRS Chapter 329. By definition, any activity that falls outside of these regulations is not regulated cannabis.

We believe clarity as to what is permitted by law is fundamental to any legal, regulated system. It is important for the agencies that regulate cannabis to have the tools they need to perform compliance and oversight responsibilities as necessary to ensure compliance with the law. It is equally important for dispensaries and medical cannabis patients to have clarity about the existing regulations. There is currently some confusion in the marketplace and community of medical cannabis patients as to what is permissible under the law, and something must be done to clarify the intent of both Chapter 329 and Chapter 329D. We believe this measure will help both dispensaries and medical cannabis patients interpret and comply with the letter and spirit of the law on equal footing. It will also help the regulatory agencies educate the community regarding current permissible uses of cannabis.

We respectfully request that the Committee pass this measure to allow for discussions to continue on these issues. Thank you for the opportunity to submit testimony in support of this bill.



Akamai Cannabis Consulting

3615 Harding Ave, Suite 304

Honolulu, HI 96816

TESTIMONY ON HOUSE BILL 1217 HOUSE DRAFT 2
RELATING TO MEDICAL CANNABIS

By

Clifton Otto, MD

House Committee on Finance
Representative Kyle T. Yamashita, Chair
Representative Lisa Kitagawa, Vice Chair

Thursday, February 23, 2023; 1:30 PM
State Capitol, Room 308 & Videoconference

Thank you for the opportunity to provide COMMENTS consisting of suggestions for amendments to this measure intended to protect and improve patient access:

Current grow site size estimates based on department testimony:

<u>No. of patients</u>	<u>No. of Sites</u>
1000	1
41-50	1
31-40	2
21-30	3
11-20	10
6-10	71
2-5	1138

Page 5, Line 19:

For the purposes of “medical use”, the term “distribution” is limited to the transfer of cannabis and paraphernalia [:-] from the qualifying patient’s registered primary caregiver to the qualifying patient, **or between qualifying patients registered to the same grow site.**”

Page 7, Line 15:

(4) The cultivation, handling, or possession of [a qualifying patient’s] cannabis for medical use, unless the person is **[the] a** qualifying patient or **[the] a** qualifying patient’s registered primary caregiver.”

Page 8, Line 13:

No more than **[five] ten** qualifying patients may use any particular location to cultivate cannabis; provided that this limitation shall not apply to qualifying patients who obtain a written exemption from the department of health; **and provided further that the**

department shall adopt rules pursuant to chapter 91 to provide an application and decision-making process for obtaining a grow site exemption; and provided further that all currently existing grow site locations that have greater than ten patients shall be grandfathered until December 31, 2025.

Page 10, Line 19:

To the extent the department is authorized by this chapter, the department may conduct inspections of grow sites to verify a person’s compliance with this chapter; provided that grow site inspections shall be voluntary and shall not involve law enforcement; and provided further that the department may revoke grow site authorization independent of registration for all qualifying patients registered to the same grow site if a particular grow site refuses an inspection after two attempts.

Page 11, Line 20:

(e) No person shall mischaracterize or disguise transactions arising out of the production, manufacture, sale, or distribution of cannabis intended for medical use as another type of compensation or expense; provided that this limitation shall not apply to the sharing of expenses by qualifying patients registered to the same grow site.”

Page 12, Line 15:

No person shall [~~produce, manufacture, or~~] dispense cannabis or manufactured cannabis products without a dispensary license.”

§329D-1 Definitions. As used in this chapter:

"Enclosed indoor facility" means a permanent, stationary structure with a solid floor, rigid exterior walls that encircle the entire structure on all sides, and a roof that protects the entire interior area from any exterior view and elements of weather; provided that the roof of an enclosed indoor facility utilized as a production center pursuant to a medical cannabis dispensary license application or license renewal application submitted after January 29, 2016, may be partially or completely transparent or translucent. An enclosed indoor facility [~~excludes~~] may be a greenhouse or shade house that [~~does not comply~~] complies with these requirements.

§329D-8 Laboratory standards and testing; laboratory certification.

(d) the department shall adopt standards for a state certification for the organic cultivation of cannabis by dispensaries.

Dual Use of Cannabis Task Force final report: Additional Recommendations, p. 36:

“Recommend the State of Hawaii take direct action to stop Federal Schedule 1 classification of cannabis from being applied to Hawaii’s registered medical cannabis patients, certifying medical professionals and state licensees.”

HB-1217-HD-2

Submitted on: 2/22/2023 12:49:15 PM

Testimony for FIN on 2/23/2023 1:30:00 PM

Submitted By	Organization	Testifier Position	Testify
Sam De La Paz	GreenWave Consulting	Oppose	Remotely Via Zoom

Comments:

I oppose the proposed bill HB1217

This bill is completely rooted in prohibition and seeks to further criminalize Medical Cannabis Users and 329 Card holders.

- It is understood that regulators, and legislators alike, are concerned about illicit activities lacking public health oversight and that the stacking of multiple 329 cards on a single property is a concern due to the lack of regulatory oversight.
 - The leadership in Hawai'i needs to recognize that further criminalizing Cannabis activities BEFORE you have a meaningful legalization and adult-use framework established is only furthering prohibition. This will only deter participation in a regulated system and create a more robust illicit market and not the other way around. We have seen this in other states.
 - I would encourage the leadership to vote NO on the prohibitionist HB1217 bill and instead add language to an ultimate and all-encompassing legalization bill.
- **Some reasonable considerations for similar language to be introduced into a bill would be as follows:**
 - Restriction of patient cards per parcel to 50, for the time being, is a reasonable meeting point
 - Establish a formal board of Cannabis stakeholders and public health representatives that is appointed to assist any regulatory agency in the establishment and expansion of an adult use or dual-use framework

The people that built the Cannabis "Industry" just want to be heard and included in these processes. Give them a seat at the table they built and roll out legalization in a pragmatic and inclusive way and you will see Hawai'i become the most successful state to legalize Cannabis. If you further criminalize, you will only drive the traditional market further underground.

HB-1217-HD-2

Submitted on: 2/22/2023 1:15:15 PM

Testimony for FIN on 2/23/2023 1:30:00 PM

Submitted By	Organization	Testifier Position	Testify
Hawaii Cannabis Union	Hawaii Cannabis Union	Oppose	Written Testimony Only

Comments:

Please oppose. Thank you.



Hawaii Cannabis Hui

Aloha Chair, Vice Chair, and Members of the Committee,

My name is Me Fuimaono-Poe . I live in Pauoa valley. I am writing this on behalf of the Hawaii Cannabis Hui, Hawaii’s only citizen group dedicated to getting cannabis legalization right by prioritizing social equity before all other business interests **We are writing in strong opposition to HB1217**. This bill limits the amount of 329 cards registered to a single site to five, gives the Department of Health the authority to do searches at residences to ensure compliance, and creates a criminal pathway for people who produce, manufacture, or dispense cannabis without a dispensary license.

Although this legislation has good intent, this legislation will affect the people in our community who choose not to go to dispensaries while creating more barriers to access. According to a report from the Hawaii Cannabis Industry Association, only 26% of our newly registered medical patients go to dispensaries. (Gonce, Cheng, Jarvis, Brewbaker, 2022) According to their own data, this means that over 75% of patients are getting cannabis from other sources. This legislation would create regulations that could potentially criminalize most of our local 329 patients.

“Card stacking” is not a threat to our community. It allows patients to utilize deep and extensive knowledge required to cultivate cannabis while sharing resources in order to have access to medicine. The vast majority of these group grow sites are families and friends growing together and sharing the heavy burden of cultivating plant medicines. Is this a reason to create laws that will turn these individuals into criminals? Inspections by the DOH should remain voluntary with an opportunity for patients to comply and make changes as necessary. Patients are not criminals and should not have their residences inspected as if they are.

Regarding Section 7B:

No person shall produce, manufacture, or dispense cannabis or manufactured cannabis products without a dispensary license.

Many patients create their own cannabis products for many different reasons. Some include cost, allergies, dietary requirements, and product preferences. Criminalizing patients for consuming their medicine in the ways that best alleviates their ailments is wrong and should not be restricted by legislation. This part of the bill should be taken out completely.

Patients need control over the quality and cost of their medicine. We need the DOH to be a resource that can help keep patients safe, not a hostile agency that will criminalize them. Hawaii and our cannabis patients have been subjected to a brutal war on drugs, including Green Harvest, Operation Wipe Out, job loss, incarceration, subsequent criminal records, and continued stigmatization. This legislation will perpetuate these harmful effects. Please consider a no vote.



Hawaii Cannabis Hui

Mahalo,
Me Fuimaono-Poe FNP-BC

To: House of Representatives

02-23-23

Regarding : SB1217 HD2

Stance : Testimony in opposition

Aloha Chair, Vice Chair, and Members of the Committee,

My name is Kai Luke, a representative of Cannabis Society of Hawai'i a diverse group of Community members made up of Native Hawaiians, People of Hawai'i, 329 Patients, Health Care Professionals, Dispensary workers, Previous Dispensary workers, Industry Professionals, Concerned Citizens, and Advocates in Health and Wellness.

We are not Political and not into Politics. This is a voice of concern and confusion. Bills like this and words and terms used to confuse the regular citizen. Transparency is on current shareholders who are currently involved expanding Cannabis in Hawai'i.

We are writing in strong opposition to SB1217 HD2. This bill limits the amount of 329 cards registered to a single site to five, gives the Department of Health the authority to do searches at residences to ensure compliance, and creates a criminal pathway for people who produce, manufacture, or dispense cannabis without a dispensary license.

Current guidelines does not limit the amount of caregivers and cardholder to a property or TMK. Taking away Patient's right to DIY after several years would be fatal to our community. The program was supposed to be going from Vertical to Horizontal opening opportunity for small business and since has not. Plant medicine doesn't need Gatekeepers. This legislation would create regulations that could potentially criminalize most of our local 329 patients.

Many patients create their own cannabis products for many different reasons including cost, allergies, dietary requirements, and product preferences. Criminalizing patients for consuming their medicine in the ways that best alleviate their ailments is wrong and should not be restricted by legislation. This part of the bill should be taken out completely. Limiting Patients to plant count does not take into consideration of male plants and pheno hunting with cultivars.

DOH should be a resource that can help keep patients safe, not a hostile agency that will criminalize them. Hawaii and our cannabis patients have been subjected to a brutal war on drugs, including Green Harvest, Operation Wipe Out, job loss, incarceration, subsequent criminal records, and continued stigmatization. This legislation will perpetuate these harmful effects if HB1217 HD2 is passed.

We are not interested in a perfect bill as one does not exist, however a bill that will consider the lives of all shareholders and Community members we will support. Please consider a NO vote from CSOH.

Mahalo,
Kai Luke, Cannabis Society of Hawai'i
cannabissocietyofhawaii@gmail.com

Aloha Chair Yamashita, Vice Chair Kitagawa, and representatives of the Committee on Finance.

I am writing this testimony in **STRONG OPPOSITION** to **HB1217**. **This bill seeks to kill off passionate, safe, and affordable caregiver-patient cooperatives and further commercialize Hawaii's own quasi-monopoly of dispensaries through the help of HICIA and other industry leaders**. The passage of this bill would **severely limit patient freedom** and form an environment that would require **THOUSANDS of 329 patients** to purchase their medication from dispensaries at a significant premium in comparison to what a caregiver could provide. This bill would also criminalize many members of the grower cooperative community who were already impacted by the war on drugs many a year ago.

Caregiver Cooperatives and the Caregiver Program

Over the 5 years I have been a 329 patient, I established many relationships with local caregivers and patient cooperatives that exemplify how a medicinal cannabis program with social equity and affordability baked in should **TRULY** function. **Many, if not ALL these cooperatives serve their patient base with passion, love, and aloha**. As a native Hawaiian, many of these co-operative communities exemplify kuleana to the land and the patients they serve. Many caregiver-patient cooperatives function like an ahupuaa would, communities providing for one another, showing respect, love, and passion for the plant and the people they provide care for. **These cooperatives, for many like me, exemplify the TRUE HAWAIIAN way to cultivate crop**. Many local caregivers also harness the power of the Hawaiian sun to grow medicine for their patients whereas dispensaries use excessive amounts of energy to cultivate and manufacture their products.

Patient Affordability and Diversity of Product

Tai Cheng of Aloha Green Holding stated that his dispensary sells cannabis flower for as low as \$199 for an ounce. He also stated that the national average cost for an ounce was also around \$260. The representative of Aloha Green Holdings failed to mention that the products offered at this supposed price range are often due to wanting to rid of old/unsold inventory. When asked for comment on the pricing of such medication, Aloha Green failed to respond to patient inquiries. **Citing the websites of Cure Oahu, Aloha Green Apothecary, and Noa Botanicals, these dispensaries on average, sell an ounce of cannabis flower for \$400+. This is simply unacceptable and unaffordable to many patients, and the types of offered products do not meet the needs of all patients**. Compared to the cost of having a caregiver or cooperative grow on your behalf, dispensary prices can range at **DOUBLE** or even **TRIPLE** the rate for products that caregivers can grow for patients. **I believe it is in 329 patient interests to continue with the caregiver program AS IS and AVOID killing off these vital caregiver-patient cooperatives**.

Is This Fair? Is This Equitable? Why are we here?

Cannabis has been medicinally legal in the state of Hawaii since the year 2000. For those some sixteen years before dispensaries came into existence in the state, zero complaints relating to the safety, testing, and viability of the caregiver-patient system. **Despite this, the HICIA continues to lobby against caregivers and patients that have existed in the space before them for at least a decade longer, if not two.** Many of the dispensaries have formed an alliance in the HICIA and complain of **low dispensary utilization by 329 cardholders.** There obviously has to a reason for this, and it's not the impact of the illicit market. If these dispensaries had cared about the illicit market's effect to their revenue, they should be rallying for legislation to be stricter on the import of these substances, not punishing caregivers and patients. I believe this bill was only crafted with the dispensary utilization and commercialization in mind. The dispensaries have already generated the excess of **\$65M (\$65,000,000 USD) of gross revenue** (Calculated using tax revenue per DOH reports 2022) and project that their revenue will only increase. Despite this, the industry association continue to lobby and craft legislation in which they would be the sole beneficiary in receipt of more revenue and profit.

Conclusion

THE PASSAGE OF THIS BILL WILL FORCE MANY PATIENTS TO UNWILLINGLY PURCHASE FROM DISPENSARY ESTABLISHMENTS TO OBTAIN MEDICINE AT A PREMIUM.

IT WILL CRIMINALIZE LEGACY CAREGIVERS AND COLLECTIVES THAT HAVE BEEN PROVIDING SAFE MEDICATION FOR YEARS AND ALREADY EXPERIENCED THE IMPACTS OF THE WAR ON THEIR MEDICATION.

THIS BILL SEEKS TO FURTHER COMMERCIALIZE THE MEDICINAL CANNABIS INDUSTRY FOR PROFIT AND DISREGARDS PATIENT AFFORDABILITY.

THIS IS NOT EQUITABLE; THIS IS NOT A SUSTAINABLE MODEL FOR MEDICINAL CANNABIS IN WHAT MANY KNOW AS "PAKALOLO LAND."

Mahalo for the opportunity to testify on this measure.

Maddie Meheula
329 Cardholder
Patient Advocate

HB-1217-HD-2

Submitted on: 2/21/2023 4:37:01 PM

Testimony for FIN on 2/23/2023 1:30:00 PM

Submitted By	Organization	Testifier Position	Testify
Loretta Black	Individual	Oppose	In Person

Comments:

I oppose this bill

HB-1217-HD-2

Submitted on: 2/21/2023 4:40:30 PM

Testimony for FIN on 2/23/2023 1:30:00 PM

Submitted By	Organization	Testifier Position	Testify
Alexis	Individual	Oppose	Written Testimony Only

Comments:

Oppose

HB-1217-HD-2

Submitted on: 2/21/2023 6:23:09 PM

Testimony for FIN on 2/23/2023 1:30:00 PM

Submitted By	Organization	Testifier Position	Testify
Mark Tamosiunas	Individual	Oppose	Written Testimony Only

Comments:

Aloha! After carefully reading HB1217, I noticed one section that speaks loudly to me. As a Hawaii 329 card holder, I follow Hawaii laws completely. However, I have come to a dilemma. My neighbor calls the police everytime I smoke cannabis inside my residence. The police usually visit at least one time evry day and it is definitely a form of harrassment from my neighbor. On one of the last visits an HPD officer told me that they know my neighbor is harassing me and the Police suggested that I smoke my medical cannabis outside near the public sidewalk and street, which creates another potential problem for myself. This is in regards to and I quote, "consumed or used in any way while it is in the public place;". I feel the need for antidiscrimination laws included in this Bill. I am worried I might be evicted from my residence due to the police complaints generated by my neighbor and therefore must oppose HB1217 until antidiscrimination/prejudice/harrassment clauses and protections are added. Mahalo.

HB-1217-HD-2

Submitted on: 2/21/2023 8:10:26 PM

Testimony for FIN on 2/23/2023 1:30:00 PM

Submitted By	Organization	Testifier Position	Testify
Shane celentano	Individual	Oppose	Written Testimony Only

Comments:

I Shane d celentano oppose hb1217 hd2

HB-1217-HD-2

Submitted on: 2/21/2023 8:21:51 PM

Testimony for FIN on 2/23/2023 1:30:00 PM

Submitted By	Organization	Testifier Position	Testify
rikki celentano	Individual	Oppose	Written Testimony Only

Comments:

I Rikki celentano oppose hb1217 hd2

HB-1217-HD-2

Submitted on: 2/21/2023 10:33:41 PM

Testimony for FIN on 2/23/2023 1:30:00 PM

Submitted By	Organization	Testifier Position	Testify
Jasmine Young	Individual	Support	Written Testimony Only

Comments:

I don't support taking away medical growing rights as established in the year 2000 because I think this would benefit the state by bringing revenue in monthly, as well as, yearly. I find this beneficial for our islands and the people who are dealing with medical illness.

Thank You,

sincerely,

Jasmine Young

HB-1217-HD-2

Submitted on: 2/22/2023 4:41:20 AM

Testimony for FIN on 2/23/2023 1:30:00 PM

Submitted By	Organization	Testifier Position	Testify
Mykel Medeiros	Individual	Oppose	Written Testimony Only

Comments:

I don't support taking away people's medical grow rights as established by the state in the year 2000.

HB-1217-HD-2

Submitted on: 2/22/2023 4:58:46 AM

Testimony for FIN on 2/23/2023 1:30:00 PM

Submitted By	Organization	Testifier Position	Testify
shayne pung	Individual	Oppose	Written Testimony Only

Comments:

Aloha. I'm born and raised Native of hilo Hawaii on big island and I strongly oppose and don't support taking away peoples medical grow rights as established by the state in the year 2000. We on the big island has been and continuing to be lied to by dispensaries and people with incorrect data. Let us natives gather data and give you real stats and why most Hawaiian natives on big island that use medical cannabis don't get the 329 cards and all the data the doh and dispensaries are telling them isn't factual.

HB-1217-HD-2

Submitted on: 2/22/2023 9:19:56 AM

Testimony for FIN on 2/23/2023 1:30:00 PM

Submitted By	Organization	Testifier Position	Testify
Pat Fondren	Individual	Oppose	Written Testimony Only

Comments:

Hello I strongly oppose HB 1217

it's an obvious push from dispensaries to limit how citizens of Hawaii obtain medicine .
So much attention has been put on wailua care and how many patients they care for . It's crazy to
think the health department want to change things just to shut down one medical grow on Oahu .
All considerations for outer islands has been neglected.

HB-1217-HD-2

Submitted on: 2/22/2023 9:41:06 AM

Testimony for FIN on 2/23/2023 1:30:00 PM

Submitted By	Organization	Testifier Position	Testify
Michael Stacy	Individual	Oppose	Written Testimony Only

Comments:

I'm attempting to attach evidence of legislative fraud by Randy Gonce of Hawai'i Cannabis Industry Association. I'm unable to attach a document AND submit written testimony? Website malfunctioning, suspend voting on all bills. Senators AWA and San Buenaventura have the document in question. No-one in any part of the legislature can pretend that evidence does not exist. I am attempting to attach the document now, and testimony will not submit with an attachment. Process is broken. Postpone all voting, the public is unable to participate in the process.

The state of the industry 'study' is based on the lie that the legally compliant medical cannabis patients are a "black market". This email is Randy Gonce speaking to Paul Brewbaker about myself, an patient activist trying to prevent HICIA from ignoring the patients and submitting false data in testimony for a third year. I've alerted the Federal legislature about the attack on patient rights by lobbyists in the Cannabis Industry Association network. CACIA and other states are in public records following the same disinformation misinformation tactics, in public testimony in the legislature. Presenting licensed and legal grows in the "black market" statistics. PLEASE, ignore the attack on myself, and observe how the executive director of HICIA refers to all legitimate licenced growers as grey market, and anyone who is a caretaker as a criminal. He then worked to exclude all patient data. The study is a weapon. I was part of the ongoing conversation in this email. Paul Brewbaker of TZeconomics is an ethical and impartial scientist, and Randy Gonce did not understand that. I was part of this conversation, and several with Paul Brewbaker after the study. HICIA insisted in writing that no patient data be included. Several times. Paul Brewbaker provided the report he was paid to, and he is completely justified in cashing the HICIA check. He told me the other day that he regrets everything that HICIA has done, using the report. HICIA was on NPR the other day, Randy Gonce, telling the general voting public that the criminal market in Hawai'i is dangerous, and must be legislated out of existence. He is now committing wire fraud, in pursuit of committing fraud in the legislature, at state and federal level. I alerted the FBI in February 2022. I've been fighting for my life ever since, sorry for suddenly surving and pointing out that HICIA is interfering in the medical treatment of every medical cannabis patient in Hawai'i. I also point out that any arguments against unlicensed businesses should be made AFTER the opportunity exists for the entrepreneur community has the legal option to enter a legal marketplace- WHICH IS BEING PREVENTED BY HICIA FRAUD! If the argument is against unlicensed businesses, do not attempt to solve the problem by punishing the patient community, and criminalizing hard won personal cultivation

rights. If the argument is against unlicensed sales on a black market, prove the market exists, instead of using false data. If the patients are at risk from the actions of any grower group, licensed or not, **ALLOW THE PATIENTS TO BE HEARD BEFORE THE BILLS ARE DRAFTED!** The entire legalization ballot, as it currently exists, needs to be **KILLED**. Every single bill that has been developed with the HICIA lobbyist group presenting the scientifically **WORTHLESS** 'study' is a fraud against the citizens of Hawai'i. Whether they are cannabis users or not: their friends and families will be punished, and their taxes used to do it. I call on the legislature to act as one, and stop the bills in question immediately, until the damage done by HICIA can be evaluated. I call on DOH to reach out to the entire patient community and offer the opportunity to participate in the **FIRST** honest and scientifically valid study of cannabis in Hawai'i. The first **EVER**. **THERE SHOULD BE NO LEGISLATION PASSED WITHOUT PATIENT PARTICIPATION FROM THE FIRST DAY**. We cannot, as an at risk group, be required to navigate the states public testimony process online as our only recourse in fighting the actions of a secretive and incredibly well funded **NATIONAL** political lobbyist group. The dispensary system should be penalized, formally reprimanded for supporting HICIA actions that resulted in this abuse of the legislative process. They should lose their bonds. The dispensary system is valuable, but not as it currently exists. In order for the patients to be truly served, protected, and well represented, the dispensary system should be a co-op. Private business does not have the right to pre-legislate control of the recreational cannabis market on the basis of their medical only mandate. The dispensary system support of HICIA is a **R.I.C.O. Violation**. Kill this bill. For over reach, if no other reason. There are options that do not require punishing the patient community, regardless of their own actions. My husband died in my arms October 18 2022. The daughter of my heart, his daughter Jenny, died May 27 2022. They were a legal part of the medical cannabis program in Hawai'i. They were not criminals. I will survive, crippled, scarred, mourning in the emptiness where my family once was. I am a patient, not a criminal. When I water my ten plants it reminds me that I belong in **THIS** world. Ive been an activist here since 1990, going to college for agriculture, working for the day when I would be part of the global landrace preservation community. Not a monetary goal. It is my **PURSUIT OF HAPPINESS**. Now I am old and broken. Grateful for the memories of friends and family who have passed from my view on the way to this day. I miss my family. We shared our moments in the sun, growing our flowers. Proud that they were legal. Hoping we would live. Never forget - you are legislaing the medical care of terminally ill patients, not preparing a red carpet for the thieves planning to steal the 'industry'. **FACT**: you are not protecting the public when you criminalize personal grows. The **BEHAVIOR** must be legislated. There's no benefit to criminalizing cultivation, at any level. When it's a little 10 plant patient grow, or a co-op with 50 patients, there is no benefit to the public by criminalizing it. When it's a patients little 10 plant grow, you risk the life of that patient, and you are interfering with their medical treatment. Kill this bill, and all legislation compromised by HICIA malfeasance and falsified data.

HB-1217-HD-2

Submitted on: 2/22/2023 10:03:43 AM

Testimony for FIN on 2/23/2023 1:30:00 PM

Submitted By	Organization	Testifier Position	Testify
celia tapp	Individual	Oppose	Written Testimony Only

Comments:

Please don't take away patients' rights. We need more protection from the dispensaries. The licensees see every citizen 21+ as a profit symbol. We don't make enough money annually to provide you with the revenue they promise. Medical patients do not see one another as potential profits. Cannabis is a psychoactive mind-altering drug intended to be used responsibly by adults for healing, not to be pushed on our college students with back to school campaigns. Let's focus on educating our communities and prepare for federal legalization. I think there is a better way to address the collectives that you feel are too large.

HB-1217-HD-2

Submitted on: 2/22/2023 10:13:35 AM

Testimony for FIN on 2/23/2023 1:30:00 PM

Submitted By	Organization	Testifier Position	Testify
Fehren Jones	Individual	Oppose	Remotely Via Zoom

Comments:

Aloha mai kakou!

I strongly oppose this HB1217 bill for many reasons but here are a few.

I do not agree with 329 card limit of 5-10. There are many great caregivers/farmers that carry more than 10 because of their craft and their patients are entrusting these caregivers/farmers with their medicine. I real time, it's already difficult with a limit of card per patients, during the plants cycle from seed/clone to harvest and repeat, it cannot fulfill the average patients medication needs. Thats 5 plants in vegetation and 5 in flower. What were to happen if a vegetation plant dies off or with these recent weather of rapid winds and rains that breaks off the plants branches, itll be very difficult to replace another plant to meet or jump into that cycle due to plant limit. Theres no safety net for backup. Possibly: increase the plant number per card patient, I think 20 is ideally fair, of 10 vegetation and 10 flower. Also, increase the card numbers for caregivers/farmers to 10. Also, take into consideration square footage. If a farmer has invested into land space, I think they have the opportunity to fill their square-foot, if they wish. Those with a larger square-footage, should be able to grow more than the average, yes, with some guidelines and restrictions. Maybe find these caregivers that already hold 8+ cards and their patients and ask why? Some farmers may have the perfect location to grow, therefore maybe their patients prefer these caregivers due to result of better tasting, outdoor, sundown. Just like our local farmers markets when we purchase produce, the quality of flavor is unmatched. Plus, an added bonus, the money stays in Hawai'i economy, helping out a family.

Secondly, I do not support HB1217 is the manufacturing. I recently lost an uncle 3 days ago, cancer. And another uncle, his brother, exactly a year ago, cancer as well. I didn't have the time or money to go to the dispensaries and purchase infused coconut oil and RSO. However, I had some in my refrigerator, that I made myself from my personal harvest. I let nothing go to waste. The relief from these medicines for my uncles has help them to endure whatever pain they were experiencing with chemotherapy, pain in general, and to help stimulate appetite. I do not make edibles, but I am sure there's others in the community who prefers to take their medicine through edibles so there's those who create edibles. Some of those who create, may create something that their patients loves, like a returning customer to a favorite brunch spot.

I do agree with getting prisoners our after being locked up for something so simple as a plant, it's silly. It's also a waste of tax dollars for housing them, wrongfully in jail. They could be free and participating in the world.

To a small degree, I do support the legalization of cannabis in Hawai'i. I was blessed to visit Amsterdam in 2013 and got a taste of what they can do. When the locals asked where was I from? They were in praise in mentioning that Hawai'i was the best weed they've ever tasted. But I want the legalization to be done carefully right. Right as in for the Kanaka 'ōiwi of Hawai'i, first. Funds could help small time farmers, fish ponds and lo'i restoration, traditional hale builders, funds for Iolani palace, schools, non profits, grants, Hawaiian charter schools, endangered species, homeless, mental health. Yes, infrastructure, rail. We know Hawai'iis struggling with the tourist industry, it could be better, but its not.. But, Hawai'is medical 329 needs to get it together and do better. Sheckler out the other states, those to pulled the trigger too fast, they're barely making their ends meet. A,d those who are doing fairly well. However, Hawai'i could be the best. This is history in the making, let's start off with the right foot. Let's step into the right side of history.

This bill needs to be rewritten, with taking into consideration of others that do not work in/for the dispensaries and try to see where the small time farmers and their patients are coming from.

Mahalo for your time and have a blessed day.

HB-1217-HD-2

Submitted on: 2/22/2023 10:31:20 AM

Testimony for FIN on 2/23/2023 1:30:00 PM

Submitted By	Organization	Testifier Position	Testify
Daniel Carroll	Individual	Oppose	In Person

Comments:

My name is Daniel Carroll. I am a farmer and work for the University of Hawaii beginning farmer training program as a farm coach in Waialua. I support farmers and grow fruits and vegetables for local markets. I am giving testimony today in order to support the farmers in the community where I live. I strongly oppose this bill 1217 as it prohibits small farms from growing medical cannabis for our community. By limiting 5 patients per grow site (farm) it greatly inhibits farms abilities to provide medicine for even their own families. Most small farms support many more than 5 people with food why can they only support 5 medical patients? We need to allow farmers to grow cannabis as well as other food crops in order to grow and sustain and support their families. If cannabis is to be opened to recreational market, now is the time to think about supporting these farmers and not shutting them out of this potential opportunity. As far as safety, how can we depend on our local farmers to grow the food for our families and also say we don't trust their ability to grow safe medicine for adults? We live in a farming community and we want to keep it this way. This bill directly excludes small farms from participating in growing medical cannabis as a crop. If the state continues to support bills that directly inhibit our local farms from being profitable, we should reconsider how we will feed our families in the future. Please consider supporting our local farms and not corporate cannabis and greedy dispensaries. Thank you!

HB-1217-HD-2

Submitted on: 2/22/2023 10:43:29 AM

Testimony for FIN on 2/23/2023 1:30:00 PM

Submitted By	Organization	Testifier Position	Testify
Judiah McRoberts	Individual	Oppose	Written Testimony Only

Comments:

Dear Committee members,

I oppose this bill as it is not solution oriented. There has been 7 years since the dispensary bill passed with no new legislation that would expand the current system to include other licensees or licensing types (horizontal system, co-operatives ect).

It is evident that people are “card stacking” because the current system is not working for them. I believe that you should work on expanding the system instead of taking these drastic measures which will disrupt a large minority of the current 329 cardholders. Please remember that Hawaii initially created a medical program over 20 years ago that was patient centered. Let's listen to the patients and work on finding solutions that revolve around their needs first.

Thank you for allowing me the opportunity to testify.

HB-1217-HD-2

Submitted on: 2/22/2023 11:43:44 AM

Testimony for FIN on 2/23/2023 1:30:00 PM

Submitted By	Organization	Testifier Position	Testify
Karl Michael Kvalvik	Individual	Oppose	In Person

Comments:

Greetings Council Members,

Thank you for taking your time to hear my testimony today.

My name is Karl Kvalvik, and I am a 38 year old IT professional. I have been living in Hawaii since July 2017, and this is my second year participating in the Hawaii Medical Cannabis Program.

I currently have a cooperative relationship with Care Waialua Farm, as I do not have the expertise, time, and resources to grow my own cannabis plants.

I strongly oppose HB1217 for the following Reasons:

- 1) I do not have the space, resources, expertise, and time to grow my own Cannabis plants.
- 2) I rely on cooperative farms to grow high quality and very affordable Medical Cannabis medicine.
- 3) The price of Hawaii Medical Dispensary Cannabis is often 100% higher than Care Waialua Farm, and the quality is often substandard; not meeting my needs.
- 4) The Community of people I interact with at Care Waialua Farm has become a second family to me, and I cannot imagine that taken away.

I have been using Cannabis for 25 years, and have become very passionate about cannabis plant medicine.

It seems prudent for this council to take a step back, analyze the rationale for HB1217, and spend time with people like me to craft a more sustainable future for Hawaii Medical Cannabis Program.

It also seems clear the Hawaii Medical Cannabis program is not pulling in as much revenue as they would like, so a bill like HB1217 would attempt to force 329 card holders to shop at approved and overpriced dispensaries.

I submit to you that Hawaii Medical Cannabis Program does not need to "throw the baby out with the bath water" with HB1217 - because limiting Co-Op farms to 5 people would effectively shut down the Hawaii Farms that provide medical cannabis to 329 card holders that choose cooperative farm relationship.

The fact is, growing quality cannabis is not easy and requires much more space/resources/time than most working class people, so it remains important for most Cannabis Card Holders to rely on Cooperative farms, and dispensaries.

With all due respect: If the Hawaiian Council decides to pass HB1217, and Cooperative cannabis farms are shutdown, the Hawaii Medical Cannabis community will not turn to Dispensaries, they will instead turn back to the black market.

The Hawaii Cannabis Program will continue to fail until affordable licenses are issued, enmass, to responsible cooperative farms.

Thank you again for your time.

Karl Michael kvalvik
808-518-7806

HB-1217-HD-2

Submitted on: 2/22/2023 11:53:30 AM

Testimony for FIN on 2/23/2023 1:30:00 PM

Submitted By	Organization	Testifier Position	Testify
ikaika aranda	Individual	Oppose	Written Testimony Only

Comments:

aloha this bill need to be stop and rewrite. this only benefit our dispensary monopolies the industry. to maximize these crafty/ legacy grower to 5 cards for 329 caretaker is not enough for the to provide quality medical grade cannabis. I feel like the 329 plant count should be higher for 329 patients 10 to 20 plants per patients. just providing a space to farm medical cannabis like care waiialua because not everyone have the space to farm cannabis. just limited the grow on how many acres ? there are so many better solutions to help our every one just please go over bill and maybe ask your farmer what think and not dispensary politicians mahalo

HB-1217-HD-2

Submitted on: 2/22/2023 11:54:52 AM

Testimony for FIN on 2/23/2023 1:30:00 PM

Submitted By	Organization	Testifier Position	Testify
Michal C Cohen	Michal Cohen, LCSW	Oppose	Written Testimony Only

Comments:

Dear Members of the Committee,

My name is Michal Cohen. I am a resident of Kaka'ako. I am a psychotherapist who specializes in the treatment of PTSD. I have extensive experience working with veterans who have combat trauma or military sexual trauma. I also have extensive experience working with people who have been diagnosed with PTSD.

I strongly oppose HB1217. This bill is quite punitive to people who have decided to collectively grow their medicine. This bill highly favors the dispensaries and actually targets local famers and growers who are working collaboratively to help people access cannabis as medicine at a reasonable price.

Many of my clients use cannabis to manage their symptoms of PTSD. They often cannot afford cannabis that is sold at the dispensaries. They rely on cannabis collectives as a way to get their medicine. Care Wailua has been instrumental in helping my patients access affordable medicine. This proposed bill would be devastating to my patients who rely on Care Wailua to obtain their medicine.

For these reasons, as a health care provider, I strongly oppose HB 1217.

Thank you.

Michal Cohen, LCSW

HB-1217-HD-2

Submitted on: 2/22/2023 12:14:43 PM

Testimony for FIN on 2/23/2023 1:30:00 PM

Submitted By	Organization	Testifier Position	Testify
Isaiah turner	Individual	Oppose	Written Testimony Only

Comments:

I oppose this bill cause there will only be more corruption and medical can I is won't be the same. We live in a community that can't afford dispensaries prices eventually leading to sick patients.

HB-1217-HD-2

Submitted on: 2/22/2023 12:38:45 PM

Testimony for FIN on 2/23/2023 1:30:00 PM

Submitted By	Organization	Testifier Position	Testify
Shar	Individual	Oppose	Written Testimony Only

Comments:

Aloha State Legislators,

Thank you for the opportunity to speak on behalf of the community and local businesses.

We currently make wellness products for health benefits. Our customer base is mainly from our community members who have ailments such as cancer, ptsd, post-partum and beyond.

The current HB1217 Bill limits patients specifically at caregiver sites. The bill also supports dispensaries and not patient caregiver sites. If this bill is passed, our community will not have ability to receive the care they need without major restriction. It is the responsibility of our leadership to have fair laws which help our community members in need.

Although we do not currently produce products with cannabis this bill would not offer us the opportunity to expand into patient services.

This stolen sovereignty nation has continued to suffer at the hands of gentrification and laws which gear towards foreign markets and personal agenda. In this bill you have a unique opportunity to erase the lines so that dispensaries, caregiver farms, and patient services can exist together.

There are times when legislation is done, and the people suffer. This should never exist! We elected you into office because we believe you will protect the rights of the people with integrity. Furthermore, other states California, Washington, and Nevada to name a few. Have created laws and bills which regulate the medical market in a way that allows both dispensary and caregiver sites to coexist together. Hawaii should not be any different. The opposition is riddled with greed and selfish needs. The revenue of this state should support the community not big business or foreign markets.

We ask that you assist those in need medically by supporting and creating togetherness in the market. It is progressive and creates true resolve to discuss and find solutions to the current HB1217 Bill.

As a protector of this community, I urge you to support the cannabis medical need of members of the community. We the people demand a clear, concise, and fair bill which promotes the health and wellness of our community.

Mahalo,

Royalty Rising LLC

HB-1217-HD-2

Submitted on: 2/22/2023 12:40:46 PM

Testimony for FIN on 2/23/2023 1:30:00 PM

Submitted By	Organization	Testifier Position	Testify
TRICIA SILETTI	Individual	Support	Written Testimony Only

Comments:

Aloha,

I am a medical Marijuana card carrier and a Hawaii resident. I have been using Care Waialua since they opened roughly 5 years ago. I am a US Disabled Veteran, having been diagnosed with back and knee problems as well as PTSD. I have tried the allopathic path to recovery with absolutely no luck and even worse side effects from pharmaceuticals. However, Jason and the folks at Care Waialua have provided me with a place to grow my 10 plants, which I would not be able to grow at my own home, as well as access to innovative medicine made with CBD and THC, derivatives of Marijuana. I cannot afford the dispensary prices and in my opinion, no one should have to pay what they charge for medicine. But Care provides a cheaper, organic, alternative to the mold covered Marijuana sold at dispensaries. They provide a great service to people who have their medical Marijuana cards. The only reason to support this bill is to support the position of dispensaries, eliminate freedom of choice and options for those that need it, and to try to continue to control people's medical choices in how they choose to care for themselves naturally and without the dependence on expensive medicine or harmful pharmaceuticals. Please do not pass this bill or any bill for that matter that eliminates freedoms and liberty and choice.

HB-1217-HD-2

Submitted on: 2/22/2023 12:54:58 PM

Testimony for FIN on 2/23/2023 1:30:00 PM

Submitted By	Organization	Testifier Position	Testify
Richard Tucker	329islandtours	Oppose	Written Testimony Only

Comments:

Hello distinguished legislature folk,

Please do NOT pass this bill. This bill will create more criminalization of medical cannabis. This bill will create more problems than it will solve. Unless you're a dispensary owner, or stock holder, this bill will not be beneficial. I'm a disabled veteran with a service connected disability rated at 90% with the VA. All of my Pain Management doctors salute me for dropping pharma and getting a 329 card. Please do NOT pass this bill. If the dispensary owners are willing to cut the cost of their products by 50%, then maybe. This bill not only stifels community growth, but it also forces low income families to suffer even more with ohana not being able to afford their medical cannabis anymore.. The dispensaries are very expensive.. let me give you an example.. a 1/2 gram of concentrate at the dispensary is about \$60.00. Now consider, local farmer on O'ahu who also gets his products tested for saftey, he can sell you 1 Ounce (28grams) for \$300.00Now if you had a fixed income, and were able to afford your medicine at the farm, but are now being told you can only buy from a dispensary and not a co-op or grow farm that legally tests all of there products.. that's devistating .. just do the math.. Please do not put more limits on an already free to the work plant. It's ridiculas.. Please do not pass this bill.

Mahalo nui loa

Richard Tucker
Native American
Disabled Veteran
www.329islandtours.com

HB-1217-HD-2

Submitted on: 2/22/2023 12:55:34 PM

Testimony for FIN on 2/23/2023 1:30:00 PM

Submitted By	Organization	Testifier Position	Testify
Rusty Tapp	Individual	Oppose	Written Testimony Only

Comments:

I oppose this bill for taking away rights from medical patients and caregivers. I think there is a better way to address the concerns you have with large cooperatives.

HB-1217-HD-2

Submitted on: 2/22/2023 1:05:15 PM

Testimony for FIN on 2/23/2023 1:30:00 PM

Submitted By	Organization	Testifier Position	Testify
Tyler Crook	Individual	Oppose	Written Testimony Only

Comments:

Hello,

My name is Tyler Crook and I'm a resident and entrepreneur on the Big Island. I heavily oppose any bill that takes away patient rights. I ask you to please oppose this bill.

Tyler Crook

Hilo, Hawaii

HB-1217-HD-2

Submitted on: 2/22/2023 1:16:20 PM

Testimony for FIN on 2/23/2023 1:30:00 PM

Submitted By	Organization	Testifier Position	Testify
Chrissie Brown	Individual	Oppose	Written Testimony Only

Comments:

Please consider the quantity of Opposition testimony.

To: Chair Yamashita, Vice Chair Kitagawa, and the members of the House Committee on Finance,

Subject: HB1217 Relating to Medical Cannabis

I, Jody Kawika Kahiapo, strongly oppose HB1217 relating to Cannabis; Medical Use; Patients; Caregivers; Cultivation; and Grow Sites. I spent 15 years of my life with a physical dependence on opioids. I began taking them after I was prescribed a pain medication plan for a work injury. I was a walking zombie. With the help of medical marijuana I was able to stop all opioid use. Medical Marijuana has allowed me to become a living member of society. I have returned to school and am looking to graduate with honors from the University of Hawaii, West Oahu, Sustainable Community Food System, at the end of this spring.

I oppose this bill because of the difficulty, time consumption, and financial restraints growing quality medicine. When I first received my Medical Marijuana license, I took out a loan and invested well over \$5,000 in equipment and supplies, to grow a personal supply of medicine. Not once, was I able to successfully bring a plant to the harvest stage. Every single time I was infested by a pest or disease, one right after another. I spent three years learning and attempting to learn the skill it takes to properly grow this plant into medicine, before finally giving up on attempting to grow.

Once I got off the opioid medication, I decided to go to school. I believe that the self studying that I had done to learn to grow cannabis, was the stepping stone that led me into my area of study, Sustainable Community Food Systems. What I have learned in this course about the agriculture industry and the many issues that derive from it, would, will take up a college course. The bill HB1217 basically wants to regulate the number of plants, or medical cards can be "stacked" at one location, to regulate the number of plants that can be grown at one location. The problem I find is that the normal individual Hawaii residential medical patient cannot afford the time or money that goes into growing good quality medication all on their own. Having Co-op systems that allow for a number of more plants actually provides security of production, and spreads the costs of start-up equipment and maintenance costs amongst all those with the shared incentive to grow good quality medicinal cannabis. Not to get into growth cycles and time it takes for a plant to mature from seed or cutting to ready for harvest or ready for medicinal use but it makes no sense to me to limit quantities of how many plants you can grow, if none come to fruition, and you get no medicine from it. Having more plants at one location allows for safe sustainable agricultural practices to be used, and still ensures quality medication available for all the patients when they need it.

In my opinion, there are two major problems with the dispensaries in Hawaii. The first thing is the high cost of medication with an inferior product. It is difficult to explain to non-users, but besides testing for THC or CBD content, there is a connoisseur pallet that develops from the

use of cannabis, much like one develops a pallet to judge and taste fine wines. The dispensaries products have been sub-par when compared to medicine available at Co-op farms like Care Waialua. My second problem with the dispensary model is that you never get to see how the plants are grown or meet the farmers. We citizens of America are so disconnected with our food system, and our holistic natural medicines, we are used to not knowing where it comes from. At Care Waialua, we can meet the staff and volunteers, inquire after their growing practices, and learn about the industry. I know exactly how my medicine is grown and who grows it. That is where I find peace of mind. Please vote "NO" to HB1217.

Mahalo nui loa,

Jody Kawika Kahiapo

HB-1217-HD-2

Submitted on: 2/22/2023 1:57:49 PM

Testimony for FIN on 2/23/2023 1:30:00 PM

Submitted By	Organization	Testifier Position	Testify
John Adams	Individual	Oppose	Written Testimony Only

Comments:

As a patient, caregiver, and former dispensary employed cultivator, I am in strong opposition to any bill that attempts to limit a patient's access to medical cannabis products by designating the currently licensed dispensaries as the only legitimate point of sale for these products, and in doing so, criminalizes the legacy cultivators and the patient networks that they have been serving.

Hawaii has had a medical cannabis program since 2000 and didn't see its first licensed dispensary open until 2017! Who provided the patients of Hawaii with their meds for those 17 years? The independent growers and caregivers of Hawaii! To many people including myself, bills like these, written and lobbied for by those invested in the success of the dispensary system, clearly aim to shut out anyone but themselves from the cannabis market, whether it be adult use or medical. This is clearly all about money and the level of short sightedness being displayed by state legislators, and greed by dispensary license holders and associates, is simply unacceptable. Alleged concern for public health and safety is obviously just a convenient facade to try to pass these bills under.

As a former cultivator for one of the dispensaries, it's very apparent to me that there is no way for the dispensaries alone to effectively serve the patients of Hawaii. Who are the dispensaries to try and dictate to patients what products they have access to? Why would a patient ever leave their caregiver/co-op for a limited selection of assuredly more expensive and possibly even inferior product? They wouldn't, plain and simple. It's so obvious that bills like this are an attempt by the dispensaries to end the relationships and dismantle the networks formed over many years between the caregivers and patients of Hawaii, thus forwarding their agendas and leaving the dispensaries as the only legal option for patients to obtain their meds through. That's just WRONG and that is definitely NOT progress.

For the record, I'm not anti-dispensary; they do have their role in the scheme of things. It doesn't have to be legacy vs. dispensary. We absolutely can work together to build a thriving, more diversified cannabis economy in Hawaii, that best serves the interests of patients, caregivers, retailers, and the state; but HB1217 is essentially the opposite of that.

I SAY NO TO HB1217 AND ALL SIMILAR BILLS!!

HB-1217-HD-2

Submitted on: 2/22/2023 2:47:34 PM

Testimony for FIN on 2/23/2023 1:30:00 PM

Submitted By	Organization	Testifier Position	Testify
Tramontano Frank M	Individual	Oppose	Written Testimony Only

Comments:

Oppose

you are supposed to be working and serving the people

Dispensiors are capitalist overcharging the people. Stop over teaching and controlling our Freedom of choice.

thank you

HB-1217-HD-2

Submitted on: 2/22/2023 3:13:15 PM

Testimony for FIN on 2/23/2023 1:30:00 PM

Submitted By	Organization	Testifier Position	Testify
James S. Emery	Individual	Oppose	Written Testimony Only

Comments:

I am a 72 year old Veteran with Stage 4 Prostate Cancer/ Metastazised . I have fighting for 3 years now trying to keep the Cancer from spreading to my bone marrow. Tripler Oncology has me taking Hormone Therapy, which is chemical castration. I finally after 3 months designated Care Waiialua Farm as my grow site. Jason Hanley recommended I take the RSO (Rick Simpson Oil) in capsule form, available in 30-200 mg's. Also available in suppositories 600 mg. This method delivers the medicine close to the Prostate for maximum benefit. My recent Oncologist appointment showed my Blood PSA level at normal and my bone scan also showed improvement. I have not had any Chemo or Radiation Therapy to date. I attribute this to the Cannabis Oil taken the last two years. I have never been into a Dispensary as I cannot afford there prices. I believe the Cannabis plant and by-products should be available at the Farmer's Produce stands and Farmers Markets around the Island. Not with the Money Changers \$\$\$ at there Dispensary Temples I sincerely oppose this bill and urge all to vote against it.

HB-1217-HD-2

Submitted on: 2/22/2023 7:48:30 PM

Testimony for FIN on 2/23/2023 1:30:00 PM

Submitted By	Organization	Testifier Position	Testify
Drew Erickson	Individual	Oppose	Written Testimony Only

Comments:

As a 329 Card Holder, I oppose this bill. This is a horrible piece of legislation that does not serve the people of Hawaii. This is a vile piece of legislation garnished with a couple of nice-sounding ideas that will have no practical impact on the reality of cannabis in HI. Here are a few issues that need to be addressed.

-The Industry (current dispensary owners) led government body exempted from oversight forever while setting ALL rules and regs and choosing licensees.

-A 3-year 'special profit' window for the state's existing monopoly dispensaries, ensuring no real competition forever (remember, they'll also choose where new licenses can be sited, probably miles away from their existing stores and population centers)

-Creation of NEW CRIMES for both everyday citizens and businesses.

-The destruction of the legal hemp industry for dispensary owner control.

-Costly mandatory tracking program that will ensure that small businesses will struggle to participate in the market and will collect citizens' personal information for profit.

-Massive invasion of home privacy for people who choose their own personal use to scare them from not purchasing from dispensaries.

-No protection for patients who currently access dispensaries which will immediately focus entirely on tourists and recreational use.

This is one of the worst pieces of cannabis legislation ever written. We, the people, deserve better than this.

HB-1217-HD-2

Submitted on: 2/22/2023 10:29:19 PM

Testimony for FIN on 2/23/2023 1:30:00 PM

Submitted By	Organization	Testifier Position	Testify
Waakoamaikalani aluli	Individual	Oppose	Written Testimony Only

Comments:

I strongly oppose this bill! We need to have more community involvement. This bill supports the dispensaries more than anything. Majority of the good clean cannabis is found from local medical growers not the dispensaries. I have talked personally with people that work at some of these dispensaries and they are cutting corners just so they can put their products on the shelf. Let's get the cannabis community more involved.

HB-1217-HD-2

Submitted on: 2/22/2023 11:09:36 PM

Testimony for FIN on 2/23/2023 1:30:00 PM

Submitted By	Organization	Testifier Position	Testify
Mahealani Malepeai	Individual	Oppose	Written Testimony Only

Comments:

I am opposed to limiting the number of 329 cards registered on any one grow site.

With today's housing crisis more and more apartments are going up to try to meet the needs. People who live in apartments and are 329 medical cannabis card holders do NOT have the option to grow in an apartment. I do not have the exact number of 329 card holders that live in apartments but I am confident that it is greater than 5. If this change is allowed you would be cutting off patient access to most likely hundred if not thousands of patients that use grow-sites. The medical cannabis program should continue to support patient access not hinder it.

Thank you for your time and consideration of my testimony.

Mahalo

HB-1217-HD-2

Submitted on: 2/22/2023 11:30:52 PM

Testimony for FIN on 2/23/2023 1:30:00 PM

Submitted By	Organization	Testifier Position	Testify
Tasi Malepeai	Individual	Oppose	Written Testimony Only

Comments:

I am opposed to limiting the number of 329 cards registered on any one grow site. People who live in apartments and are 329 medical cannabis card holders, such as myself, do NOT have the option to grow in their own apartment. If this change is allowed you would be cutting off patient access to patients like me that use a grow-site.

Thank you for your time and consideration of my testimony.

Mahalo

HB-1217-HD-2

Submitted on: 2/23/2023 8:00:47 AM

Testimony for FIN on 2/23/2023 1:30:00 PM

Submitted By	Organization	Testifier Position	Testify
Rebecca Ching	Individual	Oppose	Written Testimony Only

Comments:

My name is Rebecca Ching and I am submitting written testimony in strong opposition to HB1217.

Cannabis is medicine for a lot of us in more ways than just smoking it. Dispensaries are limited and quality is poor. For someone who needs specific properties to help with pain and nausea, specific strains and terpene profiles help target specific ailments. Dispensaries are limited on availability of strains and potency.

this bill will harm small growers and farms that provide good quality medicine at an affordable price to many patients. This bill does not have patients interest at heart and will drastically effect patients ability to obtain their medicine. We can't afford dispensaries.

I vote no to hb1217.

HB-1217-HD-2

Submitted on: 2/23/2023 9:03:18 AM

Testimony for FIN on 2/23/2023 1:30:00 PM

Submitted By	Organization	Testifier Position	Testify
Alexis Muller	Individual	Oppose	Remotely Via Zoom

Comments:

Good afternoon thank you for your time today and hearing my testimony in opposition of HB1217. My name is Alexis Muller I am a 329 patient, a cultivator, I work in the Hawaii cannabis industry, and I have a masters in cannabis science and therapeutics from the University of Maryland school of pharmacy. I was one of the first patients in the state to get my 329 card in early 2000 when a retail system was none existent, luckily I had a good friend who was a caregiver and cultivator. He took me under his wing a taught me how to grow cannabis in live organic soil. I love soil, you know why I love soil? It contains mycobacterium vaccae which has been scientifically proven to increase serotonin in the brain and combat depression and increase cognitive function. Why does this matter? Because long before retail stores existed there was and still is a very strong collective of people like my mentor who cultivate cannabis, educated patients, and support the medical patients in the state of Hawaii. Cannabis can be expensive and time consuming to grow, many patients in Hawaii just don't have the land or space it takes to grow their own cannabis. If it was not for my mentor teaching me how to grow cannabis I would have never have had access to my medicine. His dedication and knowledge that he passed on to his patients and myself has helped 100s if not 1000s of patients access medical cannabis. He encouraged us to get our hands dirty, while providing a safe space to cultivate. He created a community of likeminded individuals who thrived. I am in no way against retails locations, I support them whole heartedly, but Hawaii legislation must not pass any laws that take away the patents ability to cultivate cannabis freely. It has taken decades to establish these collectives' systems, they were around long before retails establishments. We should not be afraid of the large numbers of patients that collectives support, we should be honoring the fact that the medical system is working. These collectives are just as essential to medical patients as any retail store. The collectives and small legacy cultivators in Hawaii have established a healthy and robust community that fosters patient engagement weather it been learning cultivation, engaging in cultivation practices, gathering to celebrate their wins & losses, sharing their hard work at the end of a harvest and supporting each other as medical patients. So I ask you today to please only pass legislation that encourages retail locations, collectives and small legacy cultivators to continue doing what they are doing by educating, sharing their land with patients, cultivating good clean cannabis and supporting the patients of Hawaii that need this medicine.

HB-1217-HD-2

Submitted on: 2/23/2023 10:58:33 AM

Testimony for FIN on 2/23/2023 1:30:00 PM

Submitted By	Organization	Testifier Position	Testify
Eric Hansen	Individual	Oppose	Written Testimony Only

Comments:

Don't support this bill... Its only creating a monopoly for over priced dispensaries

HB-1217-HD-2

Submitted on: 2/23/2023 11:09:09 AM

Testimony for FIN on 2/23/2023 1:30:00 PM

Submitted By	Organization	Testifier Position	Testify
April Price	Individual	Oppose	Written Testimony Only

Comments:

Hello. I oppose this strongly because of the limits HB 1217 has. 5-10 cards per site is not enough. People like to interact with their medicine and get to know the farmer/growers of their medicine. Very similar to a farm to table concept or even a farmers market where the farmer is present. There have been co-ops in Hawaii for a long time and people have been able to learn, heal and create community. The dispensaries have a lot of money to force the legacy market and growers out. They want to over charge people who are sick, those who have cancer and who are already stressing. Last thing we need is for uncompassionate business people taking over the market. Not all dispensaries are bad but there must be a way to have some balance. Keep the collectives, let community flourish. Collectives are also places to connect, heal and thrive. You may even meet someone who is fighting a similar battle as you are. The whole reason these hearings are happening and legalization is sweeping across the country is because patients fought decades long battles to be able to have safe access to their medicine at a reasonable price. Don't take that away from them. Don't take away some of the only joy or comfort they may have by destroying their collectives.

Thank You,

April Price

HB-1217-HD-2

Submitted on: 2/23/2023 12:17:01 PM

Testimony for FIN on 2/23/2023 1:30:00 PM

Submitted By	Organization	Testifier Position	Testify
virginia mann	Individual	Oppose	Written Testimony Only

Comments:

I am a 76 yo Medical Marijuana patient on a fixed income. I can not afford the VERY EXPENSIVE ounces that the dispensary offers. Marijuana is the ONLY medician that gets me thru each day so I would be forced to decide between medicane or food. These co-op farms are my choice. They give Compassionit care at a fair price anyone can afford. This is my Medicine that keeps me out of pain and depression every day so I hope this bill doesn't pass because it will affect so many people in a negative way when we have no choice than to go to the unaffordable overpriced dispencery. Out of compassion for the elder people like me please do not let this bill pass. Mahalo virginia Mann

HB-1217-HD-2

Submitted on: 2/23/2023 2:03:03 PM

Testimony for FIN on 2/23/2023 1:30:00 PM

Submitted By	Organization	Testifier Position	Testify
Minister, Hector Hoyos (aka) SisterFace	Individual	Support	Written Testimony Only

Comments:

Alohas Committee,

I support this bill but I guess I'm confused I think I'm gonna have to call the governors office or my senator or congressman down there and ask why you all are putting out bills that have the effect of date as the year 3000 I'm sure this is just some sort of I honestly don't know but it doesn't do anyone any good putting in testimony for anything we support or oppose that doesn't take affect until the year 3000 I mean does that make sense to you all that I'm actually bringing this up because I'm really trying to figure this out I support this bill I support any common sense bill in the medical marijuana and legalization when it happens but I think maybe you should leave the effective date off when it says something like 3000 because all of us will be dead, it's so confusing unless ur in government & understand its purpose