

Senator Mike Regan
Chair, Senate Law and Justice Committee
c/o Taylor Wamsher
Senate Box 203031
Harrisburg, PA 17120-3031

March 9, 2022

RE: Hearing on Office of Medical Marijuana

Dear Sen. Regan,

It is with pleasure I write this testimony regarding the current state of the Office of Medical Marijuana in the Commonwealth of Pennsylvania. As a board-certified pediatrician and recommending physician in Berks County, I am proud of the efforts of the Office of Medical Marijuana in bringing an important medication that has helped thousands across the Commonwealth. At the same time, there are some issues within the system that could be fixed and will be highlighted throughout this testimony.

To be certified by a recommending physician, a patient must log onto the PA MMJ portal and make an account. Once signed up, the patient has full access to a list of physicians that recommend MMJ. The patient then calls their preferred provider and makes an appointment in person or through telehealth. Telehealth is a practice implemented during the pandemic that is a preferred method of many of my patients. Luckily, they will continue to have the convenience of telehealth through recent regulation changes. Once the physician has diagnosed or ascertained a qualifying condition, they must log onto the MMJ portal, make several attestations (including the Physician Drug Monitoring Program database), and electronically sign the patient's certificate. The process of certification and recertification costs the patient anywhere between \$50 to over \$250 in addition to the \$50 fee that goes to the state for the application.

As a recommending physician, I expect to have communication with the Office of Medical Marijuana via email with updates and changes in the current legislation. Typically, this works well, however a recent incident regarding this process is worth noting. On December 2, 2021, the Office sent out an email with the following message:

"Today, the following important message was sent to medical marijuana patients:

On November 16, 2021, the Department of Health instituted a state-wide review of vaporized products containing added ingredients such as externally sourced flavorings or terpenes. Grower/processors have submitted information regarding these products to the Department for review, to include whether these added ingredients are safe for inhalation. The Department will review this information as expeditiously as possible. Should the Department's review reveal products containing added ingredients

that are not safe for inhalation, those products will be removed from the market. In the interim, you should be aware that products with added ingredients may not be safe for inhalation and you should make your own decision about whether to use these products. If you have any questions or concerns about products, you should consult with your medical professional.

Thank you,
Office of Medical Marijuana”

This email was not specific for healthcare providers and provided little information that the doctors could use to counsel their patients who got a similar email. This caused confusion to both patients and physicians as there was little information to obtain about the said products and whether they were safe or not. The next communication on this matter did not occur until February 4, 2022: “Today, the following important message was sent to medical marijuana patients:

On November 16, 2021, the Department of Health instituted a state-wide review of vaporized products containing added ingredients such as externally sourced flavorings or terpenes. Grower/processors have submitted information regarding these products to the Department for review, to include whether these added ingredients are safe for inhalation. The Department will review this information as expeditiously as possible. Should the Department’s review reveal products containing added ingredients that are not safe for inhalation, those products will be removed from the market. In the interim, you should be aware that products with added ingredients may not be safe for inhalation and you should make your own decision about whether to use these products. If you have any questions or concerns about products, you should consult with your medical professional.

Thank you,
Office of Medical Marijuana”

The positive side of this incident is that oversight works, and potentially unsafe products were taken from the market. However, there is a lot to be desired in the communication to the physicians for ‘unscheduled’ communications. There could have been specific guidance given to the healthcare directors about the scope of this incident which took a large amount of inhalation products off the market.

From the patient’s perspective, keeping telehealth as an approved method of certification and re-certification is one of the greatest improvements to the program.

Patients bring a common complaint which many times leads to a patient not being able to obtain their needed medication. Many Pennsylvanians are unwilling to give up their Second Amendment right to bear, and concealed carry, their firearms. I encourage the Office to look at the data that suggests people on marijuana as a medication are not inherently more violent than people on any other kind of medication. People on many other behavioral health medications or addictive medications like opioids can still carry a firearm in this state. However, people in the MMJ program must give up their permit to carry. People can also be drunk on alcohol and have a permit to carry a firearm. This piece of legislation must be changed as most medical marijuana patients do not show violent tendencies especially when followed by a physician.

Another barrier for patients to receive marijuana as a medication comes from commercial truck drivers. With the federal prohibition, commercial driver's license holders can't have access to MMJ and continue to hold a CDL. In addition to this unnecessary exclusion of commercial drivers, who can safely use their medical marijuana outside of work hours, much of this is caused by this country's stigma against the plant. Pennsylvania must help move the nation forward in removing the federal prohibition on marijuana.

Each of us has a responsibility to reduce the stigma attached to this medication. Decades of federal prohibition have created the stigma surrounding marijuana and thwarted the scientific development. It is imperative that the office works to reduce the stigma of the medication by making it more like any other medication that is prescribed by a physician. The assumptions with most other medications are as follows: 1. the treatment plan is between doctor and patient and 2. the patient uses the medication as recommended or prescribed. These assumptions are enough for most patients to have the safe and responsible use of marijuana. As we look towards adult use, we should continue to think about marijuana as a medication and not a drug of abuse. When I am lecturing on the value of medical marijuana across the country, I coined a new way to look at this medicine, as words matter. Think about the last time you had a headache. Did you reach for recreational Motrin? As we move to adult use, we should talk about 'over the counter' marijuana.

Thank you for your consideration on these issues.

Sincerely,

A handwritten signature in blue ink, appearing to read "Dr. Patton", is placed on a light yellow rectangular background.

Dr. Jarret R. Patton MD, FAAP

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