

Medical Use of Marijuana Program

January 1, 2014 – December 31, 2014



Department of Health and Human Services
Division of Licensing and Regulatory Services

Maine People Living Safe, Healthy and Productive Lives

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This Annual Report, Rules and Statute governing this program may be found at:
<http://www.maine.gov/dhhs/dlrs/mmm/index.shtml>

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Background

The Maine Medical Marijuana Act was legislated in 2009 and the Maine Medical Use of Marijuana Program (MMMP), under the auspices of the Division of Licensing and Regulatory Services (DLRS), was operationalized in 2010.

In accordance with MRS 22, Chapter 588 C §2425, 10, The Maine Medical Use of Marijuana Act, the Department of Health and Human Services (DHHS), Division of Licensing and Regulatory Services (DLRS) is required to submit to the Legislature an annual report that does not disclose any identifying information about cardholders or physicians, but does contain, at a minimum:

- A. The number of applications and renewals filed for registry identification cards;
- B. The number of qualifying patients and primary caregivers approved in each county;
- C. The number of registry identification cards revoked;
- D. The number of physicians providing written certifications for qualifying patients;
- E. The number of registered dispensaries; and
- F. The number of principal officers, board members and employees of dispensaries.

The purpose of this report is to fulfill that requirement, to provide a summary of changes to the Maine Medical Use of Marijuana Program (MMMP) that have been made in 2014, and outline the program goals for 2015.

Executive Summary

The MMMP is self-funded through dedicated fees to administer the operations of the program. Presently, the program is staffed with a half-time manager and two full-time support staff. In 2014, the position of Policy Analyst, was created to assist in drafting MMMP Statute and Rules changes, and to address other administrative initiatives within the program. Over the last three fiscal years, the program has progressively increased its revenue. In the 6 months ending December 31, 2014, revenue was \$735,950, with associated expenses of \$276,393, leaving revenue in excess of expenses of \$459,557. This excess precipitated discussion around fee reductions in compliance with 22 M.R.S.A. §2425 (12) (G). After a careful perusal of the program budget, expenses and funding allocation needs, a 20 percent reduction in fees is planned for early 2015. Further detail can be found in Attachment B of this report.

The MMMP has several areas of regulatory oversight including: patients certified to use marijuana as medicine, caregivers and dispensaries providing medicine for patients, and medical providers issuing certifications. MMMP has a statutory requirement to track key statistics for these oversight areas. Highlights of these statistics include the following:

- Caregiver cards - in 2014 there was significant growth in the number of caregiver cards. In 2013, 3,114 caregiver cards were issued. This number increased to 4,550 in 2014 (46.1%).
- Individual caregivers - individual caregivers increased from 1,197 in 2013 to 2,161 in 2014 (80.5%).
- Patient registration - patient registration is voluntary therefore the number of patients being reported only reflects those individuals who have chosen to register with the State. There was a slight decrease in the number of voluntarily registered patients; in 2013 1,768 patients registered with the MMMP, and in 2014 this number dropped to 1,723 (-2.5%).
- Medical Providers – 43 medical providers were registered in 2014, compared to 36 in 2013. In 2014, 8 counties did not have any medical providers registered.
- Caregiver Employees – there were 76 new and 7 renewed caregiver employees in 2014, compared to a total of 14 caregiver employees in 2013.
- Revocation of Caregiver cards – 2 caregivers had their cards revoked in 2014.
- Dispensaries – there was no change in the number of dispensaries (8) between 2013 and 2014.

Further details can be found in the Key Statistics section and Attachment A of this report.

MMMP implemented a new patient certification system to enhance program consistency and accessibility for patients. Patients now obtain a wallet-sized certification card directly from their medical providers. This new system has improved the ability to demonstrate legal participation in the program, and assures patient privacy. It also has increased operational efficiencies in the processing of applications, with the majority of applications being processed within 10 days.

In an effort to ensure transparency about the MMMP, there has been a focus on communication and education. Quarterly forums are held to encourage and support communication with caregivers, providers and other key stakeholders. Regular updates are also posted on the MMMP website. MMMP staff has conducted outreach education with 12 presentations being made to a variety of groups throughout the State.

In 2015, MMMP will continue to support caregivers, patients and providers, while ensuring regulatory compliance.

Legislative Review

During 2014, the Second Regular Session of the 126th Maine Legislature enacted several changes to the Maine Medical Use of Marijuana Act. As follows:

LD 1597 allows a primary caregiver or a dispensary's principal officer, board member or employee to invite an elected official to access their cultivation location in order to educate the elected official about the cultivation of medical marijuana. This adds an exception to the general prohibition of access to medical marijuana cultivation locations.

LD 1623 allows a dispensary to provide excess prepared marijuana to another dispensary that is experiencing an extended inventory supply interruption. The law allows DLRS to adopt rules to implement this provision based on lack of inventory and the dispensary's ability to meet patient needs.

LD 1674 ends prohibition on the use of *any* pesticides by allowing the use of *certain* low risk pesticides when the pesticide is used consistent with federal labeling requirements, and is registered with the Maine Board of Pesticides Control. Prior to using approved pesticides, the primary caregiver or the caregiver's employee must be certified in the application of pesticides, and those who have direct contact with treated marijuana plants must complete required safety training.

LD 1739 made a number of changes. It allows Certified Nurse Practitioners to certify patients for the use of medical marijuana. Medical providers may now issue a medical use of marijuana certification for “up to” one year. Existing law mandated that certifications be issued for “one year”. It defines tincture as a food. Other changes allow DLRS Program staff to transport samples for testing and to report to the Legislature on the development of its complaint process.

LD 1739 and LD 1858 require DLRS to report to the State Tax Assessor the number of medical marijuana certifications issued [or renewed] to primary caregivers and dispensaries. All DLRS licensing certification programs must comply with this requirement.

LD 1779 allows qualified patients in nursing facilities or inpatient hospice facilities to store medical marijuana in their rooms. However, this law does not limit the ability of a hospice provider or nursing facility to prohibit or restrict the use or storage of prepared marijuana by a qualifying patient. Patients no longer have to name the facility as one of their medical marijuana primary caregivers.

Law Enforcement

Based on a legislative mandate, a contract was developed with the Maine Sheriffs’ Association (MSA) to respond to complaints with specific requirements for reporting and triage. MSA provides similar services and compliance work for other State agencies and departments. The contract is slated to begin in 2015.

A contract with the Maine Chiefs of Police Association (MCOPA) was implemented for the creation of an on-line training for statewide law enforcement staff regarding medical marijuana. This training provides consistent education to law enforcement officers. The training is available 24 hours per day through an existing delivery system in use by the Maine Criminal Justice Academy.

Board of Pesticide Control

MMMP has worked with the Board of Pesticide Control (BPC) in an effort to simplify and clarify the requirements for the application and use of low-risk pesticides. BPC has trained MMMP staff on the proper method for collecting samples for testing, and MMMP staff have assisted BPC with on-site dispensary inspections and complaint investigations. BPC staff have attended

caregiver and dispensary forums to present information and education for those who plan to use pesticides in the cultivation of medical marijuana. BPC has been instrumental in developing documentation for pesticide use for the MMMP; this documentation is posted on the MMMP website. BPC is also assisting with drafting of several best practice documents for the cultivation of marijuana as medicine.

Data Management

Tracking and reporting of data is crucial to the MMMP in meeting its mission and fulfilling its statutory obligations. In 2014, a case management system was implemented utilizing the current MMMP database. The Automated Licensing Management System (ALMS) case management module tracks all complaints and their resolutions. Complaints are entered into the ALMS system, triaged by the program manager, and appropriately responded to or closed. Reports based on the data will be developed in early 2015.

The Metro system is the gateway system used by the Department of Public Safety (DPS) to access several databases and extract information. MMMP worked in conjunction with DPS to update the current Metro system so that it remains in compliance with all regulatory obligations while providing accurate information to law enforcement officials. The system is crafted specifically to facilitate the sharing of information as allowed by current statute.

Program Participant Relations

MMMP Dispensary Forums were created in 2013 and continue to be held on a quarterly basis. These forums are intended to support communication between DLRS and all 8 dispensaries. Topics for discussion have resulted in program or process changes that benefit the program and its participants. Collaboration on the development of best business practices has resulted in a best practice paper on cultivation, anticipated for release in 2015.

Caregiver Forums began in June 2014, with very positive feedback. These forums have representation from all areas of the State. Caregivers are included in identifying best practices. Caregiver websites now contain a link to the MMMP website so that all participants have access to MMMP forms, as well as copies of applicable statutes and rules. The BPC has attended both caregiver and dispensary forums to share information related to the proper use of pesticides.

A list of presentations and educational sessions can be found in Attachment C.

Petition Requests

MMMP Statutes and Rules provide a mechanism, through public petition, to add to the list of debilitating medical conditions that are allowed to be treated with medical marijuana. A petition to add Obsessive Compulsive Disorder (OCD) was received on May 29, 2014. A public hearing was held on August 6, 2014, and public comments were received and considered. A final decision by the Commissioner of the Department of Health and Human Services was returned to the petitioner on December 3, 2014, denying the addition of OCD to the list of approved medical conditions. The petition and supporting documentation and information are available on the MMMP website.

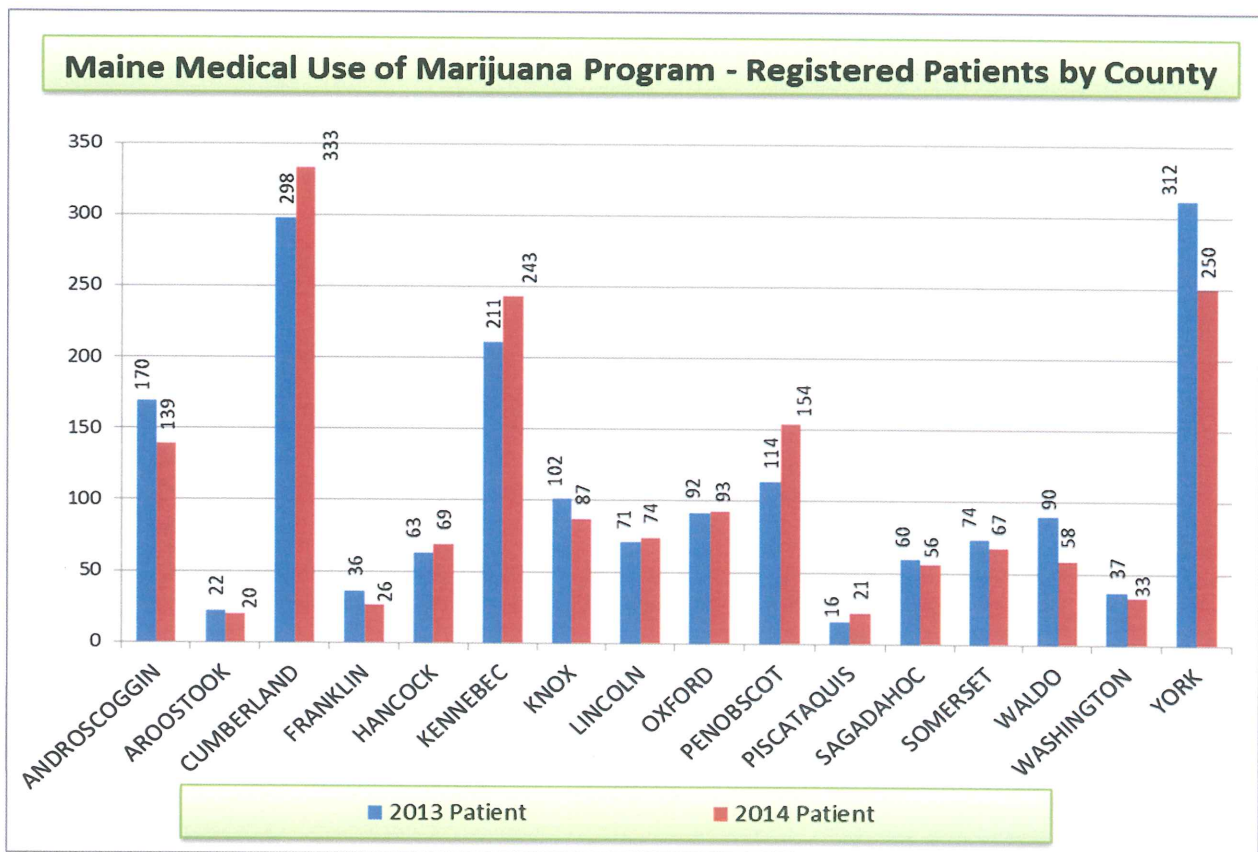
Key Statistics

The MMMP tracks key statistics by County, in compliance with statutory requirements. Because the absolute numbers are small in some counties, the graphs indicate numerical values by county, as opposed to percentages, when comparing 2013 to 2014 statistics.

Registered Patients by County

1,723 patients voluntarily registered with the MMMP in 2014. This reflects a slight decrease (2.5%) from the 1,768 patients who registered in 2013. Counties that experienced the highest growth in registered patients include: Penobscot (40), Cumberland (35) and Kennebec (32). Counties that experienced the most losses of registered patients include: York (62), Waldo (32), and Androscoggin (31).

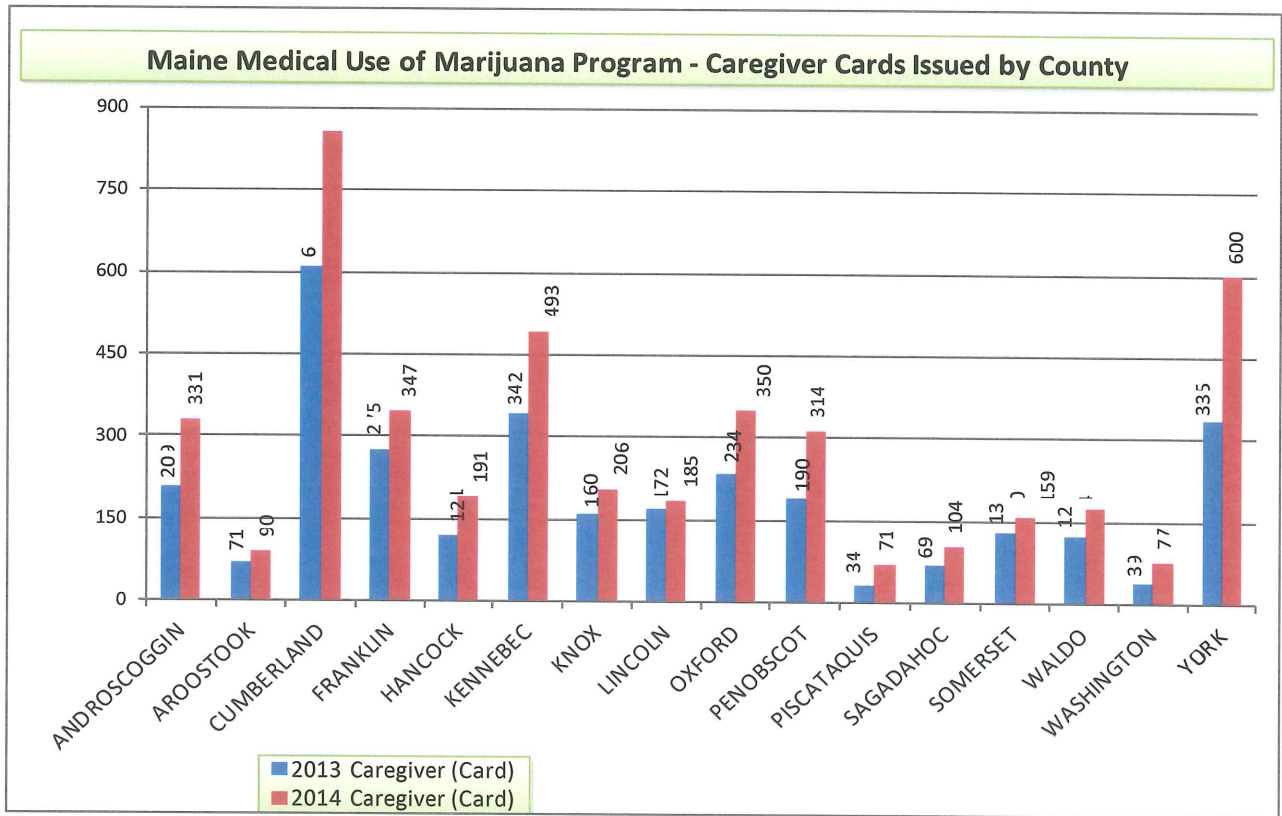
Table 1 – Registered Patients by County



Caregiver Cards by County

4,550 caregiver cards were issued by the MMMP in 2014, a significant increase of 1,436 (46.1%) over the 3,114 caregiver cards issued in 2013. All counties experienced an increase in caregiver cards issued, with York (265), Cumberland (249) and Kennebec (151) having the highest level of increases.

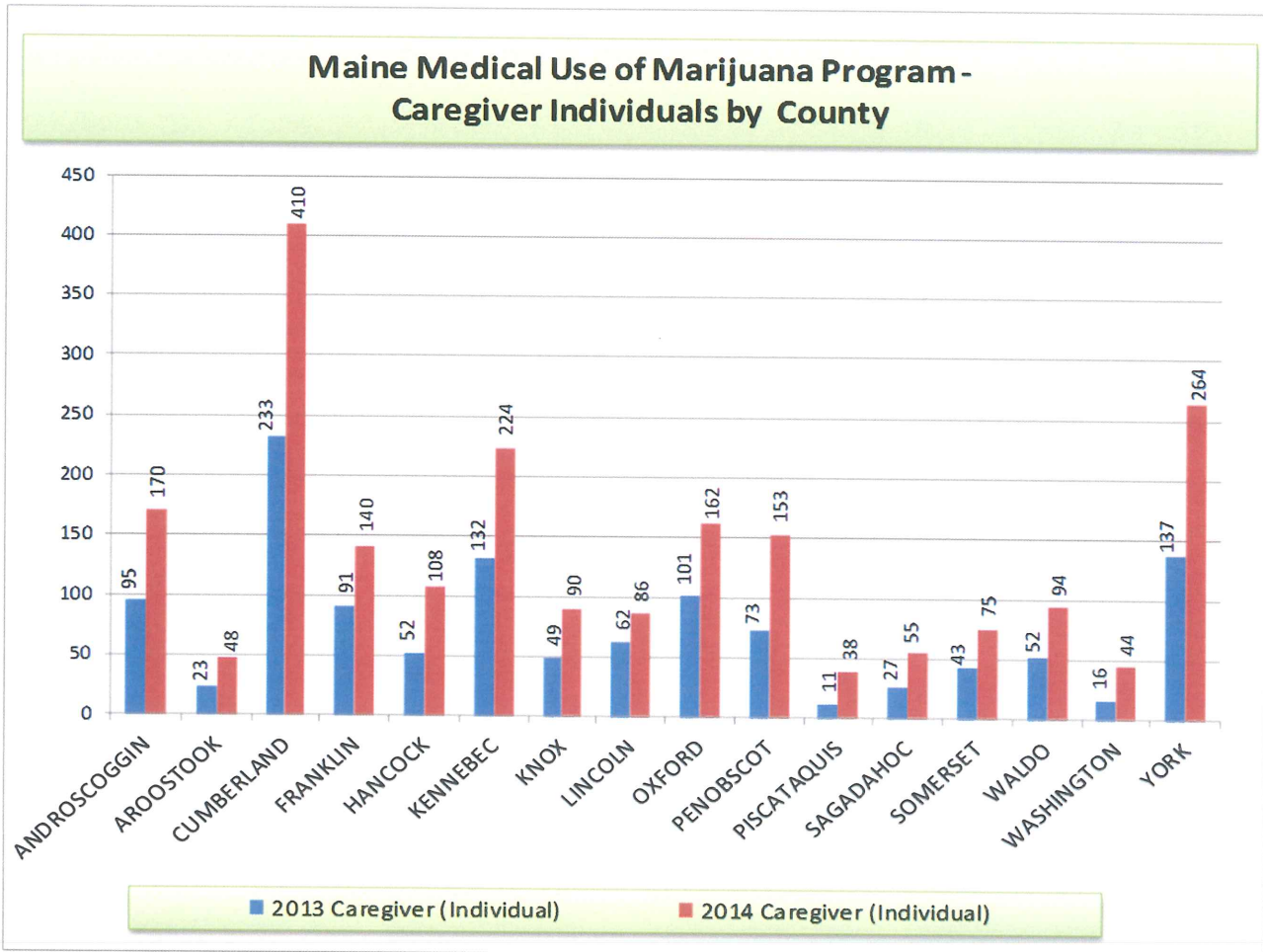
Table 2 – Caregiver Cards Issued by County, 2013 and 2014



Caregiver Individuals by County

In 2014 there were 2,161 individual caregivers; a significant increase of 964 (80.5%) over the 1,197 caregivers in 2013. All counties experienced growth in individual caregivers in 2014, with the counties experiencing the most growth being: Cumberland (177), York (127) and Kennebec (92).

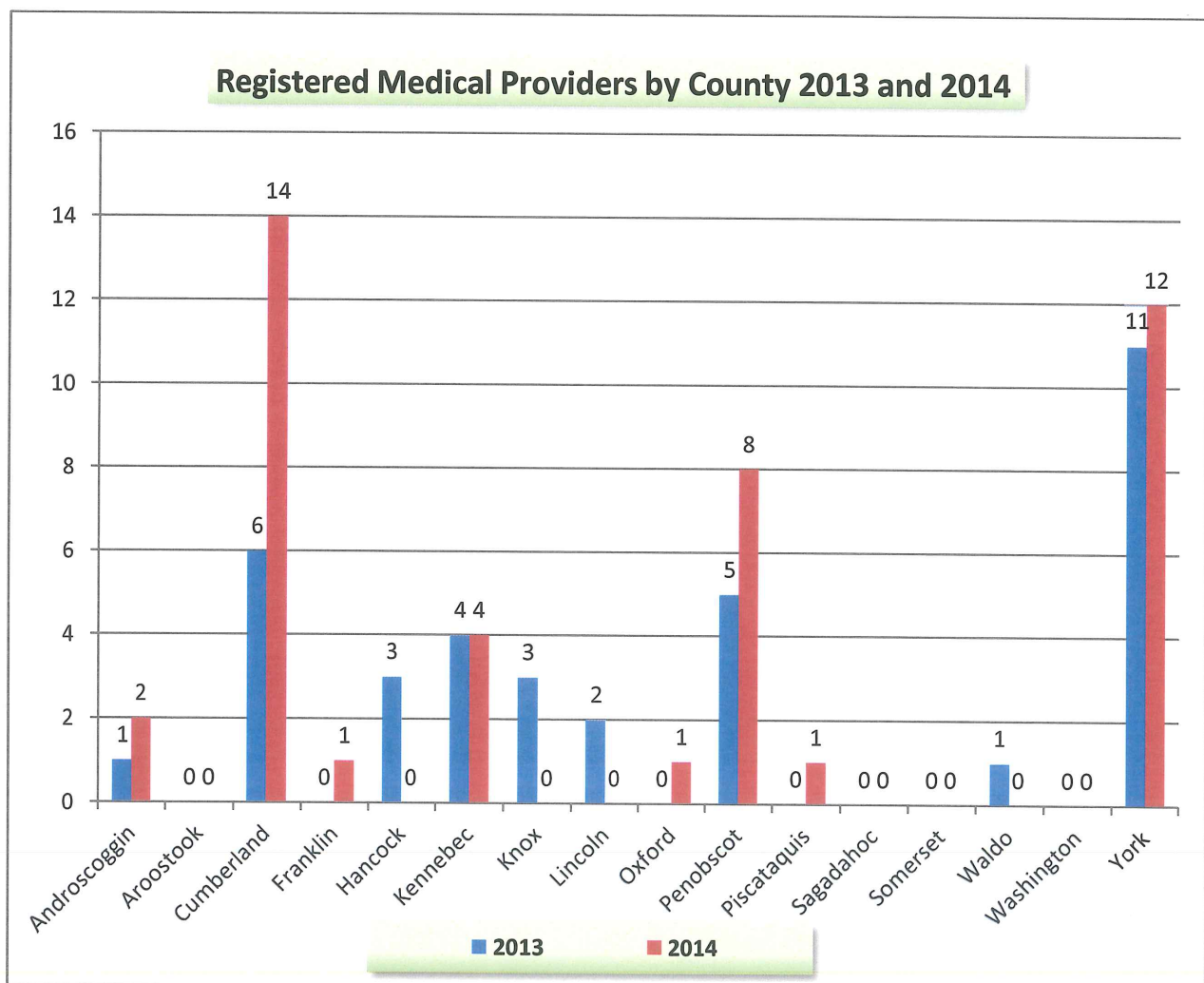
Table 3 – Caregiver Individuals by County 2013 and 2014



Registered Medical Providers by County

In 2014, there were 43 medical providers registered in the MMMP, compared to 36 registered medical providers in 2013, an increase of 19.4%. Counties experiencing the most growth were: Cumberland (8) and Penobscot (3). 8 counties had no medical providers registered during 2014: Aroostook, Hancock, Knox, Lincoln, Sagadahoc, Somerset, Waldo and Washington.

Table 4 – Registered Medical Providers by County 2013 and 2014



Program Goals 2015

In the coming year, the MMMP will continue to focus on the evolving needs of the program and its participants. Legislative actions will be reflected in revised rules, which will result in operational and process changes.

The proposed 20% fee reduction will be implemented in early 2015. It is anticipated that revenue generated will be sufficient to maintain the program and an ongoing analysis of revenue and expenses will determine the need for any further changes to the program fee structure.

In addition to current staff, there are plans, upon final budgetary approval, to hire two full-time field staff to perform licensing and regulatory duties, and to convert the half-time manager position to full-time.

Based on consumer comments and suggestions, the MMMP website will be updated with the addition of several new links to other State agencies and services such as BPC training and Department of Labor information on drug-testing in the workplace.

Preliminary planning for the first MMMP educational conference is underway, with an anticipated date in late 2015 or early 2016. Stakeholder input will be incorporated in conference planning.

Safe packaging for marijuana as medicine will continue to be a focus in the coming year. The MMMP will review safe packaging options and will conduct a survey of current packaging, with the goal of developing public information to promote the safe care, storage and use of marijuana as medicine.

Operational efficiencies will continue to be assessed including, without limitation, staffing levels, data systems and work processes, to reflect the changing needs of the program.

MMMP will continue with both Dispensary and Caregiver Forums in 2015, and will identify other opportunities to provide education and information to those interested in learning more about the program.

Attachment A – Annual Report Totals/Prior Year Comparisons Maine Medical Use of Marijuana Program Annual Report Totals/Prior Year Comparison

County	2013		2014		Percent Change	2013		2014		Percent Change	2013		2014		Percent Change	2013		2014		Percent Change	
	Patient	Patient	Caregiver (Individual)	Caregiver (Individual)		Caregiver (Card)	Caregiver (Card)	Physicians	Physicians		Physicians	Physicians									
ANDROSCOGGIN	170	139	95	170	-18.2%	209	331	58.4%	1	2	100.0%	1	2	100.0%	0	0	0.0%	0	0	0.0%	
ARROSTOCK	22	20	23	48	-9.1%	71	90	26.8%	0	0	0.0%	6	14	133.3%	0	0	0.0%	0	0	0.0%	
CUMBERLAND	298	333	233	410	11.7%	609	858	40.9%	0	1	N/A	0	1	N/A	0	0	0.0%	0	0	0.0%	
FRANKLIN	36	26	91	140	-27.8%	275	347	26.2%	3	0	-100.0%	3	0	-100.0%	4	4	0.0%	0	0	0.0%	
HANCOCK	63	69	52	108	9.5%	121	191	57.9%	4	4	100.0%	3	4	133.3%	0	0	0.0%	0	0	0.0%	
KENNEBEC	211	243	132	224	15.2%	342	493	44.2%	3	3	100.0%	3	3	100.0%	0	0	0.0%	0	0	0.0%	
KNOX	102	87	49	90	-14.7%	160	206	28.8%	2	0	-100.0%	2	0	-100.0%	0	0	0.0%	0	0	0.0%	
LINCOLN	71	74	62	86	4.2%	172	185	7.6%	0	0	0.0%	0	0	0.0%	0	0	0.0%	0	0	0.0%	
OXFORD	92	93	101	162	1.1%	234	350	49.6%	0	1	N/A	0	1	N/A	0	0	0.0%	0	0	0.0%	
PENOBSCOT	114	154	73	153	35.1%	190	314	65.3%	5	8	60.0%	5	8	60.0%	0	0	0.0%	0	0	0.0%	
PISCATAQUIS	16	21	11	38	31.3%	34	71	108.8%	0	1	N/A	0	1	N/A	0	0	0.0%	0	0	0.0%	
SAGADAHOOC	60	56	27	55	-6.7%	69	104	50.7%	0	0	0.0%	0	0	0.0%	0	0	0.0%	0	0	0.0%	
SOMERSET	74	67	43	75	-9.5%	130	159	22.3%	0	0	0.0%	0	0	0.0%	0	0	0.0%	0	0	0.0%	
WALDO	90	58	52	94	-35.6%	124	174	40.3%	1	0	-100.0%	1	0	-100.0%	0	0	0.0%	0	0	0.0%	
WASHINGTON	37	33	16	44	-10.8%	39	77	97.4%	0	0	0.0%	0	0	0.0%	0	0	0.0%	0	0	0.0%	
YORK	312	250	137	264	-19.9%	335	600	79.1%	11	12	9.1%	11	12	9.1%	0	0	0.0%	0	0	0.0%	
Grand Total	1,768	1,723	1,197	2,161	-2.5%	3,114	4,550	46.1%	36	43	19.4%	36	43	19.4%							

*Total new count added per year

*All licensing figures based on Active Licensure status (ie: Client was first-time applicant or renewed that year)

*Patient Registration is voluntary

*Physician total represents the number of physicians who register for that year

	2013	2014
Total # Caregiver Employees 2013	14	76
Total # Caregiver Cards revoked 2013	2	7
Total # Registered Dispensaries 2013	8	8

Attachment B – Revenue and Expenses

		12 Mos. Ending 6/30/2013	12 Mos. Ending 6/30/2014	6 Mos. Ending 12/31/2014
Revenues:				
<u>1446</u>	LICENSE APPLICATON FEES	10,361	-	-
<u>1498</u>	REGISTRATION FEES	807,090	1,225,693	735,950
<u>1958</u>	PROCESSING FEE	-	20,372	-
Total Revenues:		817,451	1,246,064	735,950
Expenses				
1	PERSONAL SERVICES	118,237	172,563	130,273
2	ALL OTHER			
	4039 HEARING OFFICERS	850		
	4096 CONTRACTUAL EMPLOYEE	172		
	4097 CLERICAL SUPPORT SERVICES		2,353	
	4104 OIT PROFESSIONAL CHARGES	7,539		
	4142 LEGAL SERVICES	18,273	13,225	
	4199 MISC PROF FEES AND SPEC S		5,252	
	4270 AUTO MILEAGE-GEN IN STATE	282	136	1,180
	4271 OTHER TRANSPORTATION			26
	4273 HOTEL ROOM & LODGING	77	202	
	4274 MEALS AND GRATUITIES	85	271	174
	4672 RENT OF STATE VEHICLE	554	590	
	4721 REPAIRS TO EQUIPMENT	125		
	4881 ST SHARE LENSES VDT OPERATOR		150	
	4901 STAMPS		8	
	4903 FREIGHT		128	
	4905 POSTAL MACHINE CHARGES	123	29	
	4911 POSTAGE	4,372	3,255	
	4913 INTRAGOVERNMENTAL SERVICE	699	521	
	4929 PRINTING AND BINDING	167		
	4930 TRANSCRIPTS	1,754	713	
	4939 PRINTING BINDING ETC STAT	1,387	511	
	4946 ADVERTISING NOTICES	2,106	1,071	1,197
	5035 TRAINER FEES - NON STATE		7,500	
	5301 OIT PROFESSIONAL CHARGES	3,759	8,993	
	5302 TELEPHONE SERVICE		54	
	5304 CELLULAR PHONE SERVICE	183		
	5310 IT END USER SERVICES	3,284	3,340	1,014
	5312 DP CONSULTING-NON STATE		2,798	
	5319 WEB SITE MAINTENANCE			35,239

Revenue and Expenses (continued)

		12 Mos. Ending 6/30/2012	12 Mos. Ending 6/30/2014	6 Mos. Ending 12/31/2014	
Expenses:					
ALL OTHER CONTINUED					
5352	COMPUTER MAINT AGREEMENT		199		
5355	SOFTWARE MAINT AGREEMENT	11,039	15,460	13,011	
5357	PRINTERS		574		
5370	MINOR COMPUTER EQUIPMENT	14	350		
5380	SUBSCRIPTION - PC/LAPTOP/THIN CLIENT		75		
5386	MOBILE DATA DEVICE/CONNECTION		14	14	
5387	COMPUTER SOFTWARE	129	289		
5501	CAMERA	216			
5600	OFFICE & OTHER SUPPLIES	300			
5602	OFFICE SUPPLIES	1,282	7,670	1,020	
5627	PURCHASE OF BOOKS		478		
5650	MISC OFFICE EQUIPMENT			510	
5654	ERGONOMIC OFFICE EQUIP	532			
7202	COMPUTER SOFTWARE		49,849		
8210	NSF CHARGES	60	80	40	
8511	TRANS TO GEN FUND STACAP	6,315	8,119	7,917	
DICAP Charges from the DHHS CAP	2978-0142	OMB	7,288	11,228	7,202
	2978-0196	OMB Regional	4,724	11,031	4,115
	2978-Z035	Contract Management	26	230	-
	2978-Z036	DLRS Admin	50,843	55,233	73,170
	2978-Z038	Hearings	58	209	291
Total Expenses		246,854	384,751	276,393	
Net Income:		570,597	861,313	459,557	

Attachment C - MMMP Presentations and Education Conducted in 2014

Requests for presentations and education were received throughout the year. The following presentations were provided in 2014:

Maine Nurse Practitioners' Fall Conference

National Park Rangers - Acadia National Park

Maine National Guard, Augusta, ME

Drug Free Communities

Healthy Androscoggin

Maine Sheriffs' Association Annual Conference

Truth about Marijuana Summit

Mental Health and Substance Abuse agencies

DEEP Regional Provider trainings

Breathe Easy Coalition

Child Sudden Death and Serious Injury Panel

Various law enforcement trainings

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