

Department of Health and Human Services

Maine People Living Safe, Healthy and Productive Lives

John E. Baldacci, Governor

Brenda M. Harvey, Commissioner

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Report of the Maine Medical Marijuana Task Force to Governor John E. Baldacci

January 27, 2010

On November 3, 2009, the citizens of Maine approved the Maine Medical Marijuana Act. This Task Force was created by Executive Order to perform the following functions:

- Review the implementation of similar laws in other states;
- Make recommendations on the implementation of the law in Maine, including recommendations for changes in the enacted law that are deemed necessary to ensure effective implementation and ongoing monitoring of the medical marijuana program, and protection of public health and safety; and
- Advise the Department of Health and Human Services in its development of proposed rules and fee schedules.

The Task Force included the following individuals: Anne Jordan, Commissioner of Public Safety, Anne Head, Commissioner of Financial and Professional Regulations, Kandyce Powell, Executive Director of Maine Hospice Council, Gordon Smith, Executive Vice President of the Maine Medical Association, Dan Walker, attorney and supporter of the initiative, Faith Benedetti, representing patients, Ken Altshuler, attorney representing the public, John McElwee, retired judge representing the public, Representatives Anne Haskell and Anne Perry and Senators Joseph Brannigan and Stan Gerzofsky. Brenda Harvey, Commissioner of the Department of Health and Human Services, chaired the Task Force. The Chair and members thank Catherine Cobb, Lucky Hollander and Kathy Bubar, all from DHHS, who staffed the Task Force. The Task Force met a total of five times: on December 1, 8, and 15, 2009 and January 5 and 15, 2010.

The Task Force would like to thank the Governor for the opportunity to participate in this important work on behalf of the citizens of Maine.

The Committee reviewed a summary of the principal provisions of medical marijuana statutes in the 13 states where the medical use of marijuana is permitted. In addition to Maine, those states include Alaska, California, Colorado, Hawaii, Michigan, Montana, Nevada, New Mexico, Oregon, Rhode Island, Vermont, and Washington. That summary is attached.

The Task Force briefly discussed rules adopted by states with similar statutes and there was consensus that both the statute and the rules of New Mexico were the most closely aligned with Maine's and would be used as a guide for considering Maine's statute and a template for Maine's rules. Importantly, New Mexico has had a year of experience with its law. We had great access to knowledge and experience of New Mexico staff who answered many of our questions regarding implementation successes and challenges.

The Task Force carefully considered all of the provisions of the statute, discussed myriad concerns and determined certain sections of the statute that they recommend be changed. The list of recommended statutory changes is attached and should form the basis of a Governor's proposed L.D. The Task Force was able to reach consensus on most of the language. There were a few areas about which the Task Force was unable to agree; those have been noted as such in the attached document, along with the "straw votes" for each option. These are likely areas which will receive significant public testimony.

Draft rules reflecting the law prior to recommended changes were presented to and discussed by the Task Force. Until the statute is final, however, it is not possible to draft appropriate rules that reflect the structure and the implementation of the statute. Important issues that will be addressed in the rules include detailed requirements for dispensaries, how and by which state agency photo identification cards will be managed, quality guidelines/regulations for growers and monitoring of the dispensaries.

During the final meeting of the Task Force, consensus was reached about not predetermining the number and location of dispensaries. This follows the recommendations of the New Mexico program and is consistent with the best thinking of the Task Force. Task Force members also have requested that the Criminal Law Advisory Commission review a number of the provisions in the statute to assure that they are consistent both in language and effect with other Maine statutory provisions. These provisions have been forwarded to that Commission.

Because this is an entirely new program for Maine, the Task Force recommends that a thorough review of the program be conducted and a report of that review be presented to the first session of the Legislature next year. Based on that report, the Legislature will have ample opportunity to make any necessary changes or adjustments in the statute.

It is not possible at this time to determine the cost of the program and level of fees that must be assessed to cover those costs. Once the statutory language is final, the Department of Health and Human Services will be able to complete the fiscal analysis and a fiscal note will accompany the proposed legislation. It was the intent of the drafters, as represented on the Task Force, that this legislation be self funded, so the fees will be set to assure that no additional costs are passed on to the Maine taxpayer.

Appendix A

Appendix B

Appendix C

Appendix D