Testimony to the Council of the District of Columbia
Committee on Health and Human Services
Department of Health Performance Oversight Hearing
February 19, 2016

Introduction

Thank you to Committee Chair Alexander for this opportunity to offer testimony to the Committee on Health and Human Services regarding the performance of the Department of Health (DOH). Americans for Safe Access is the nation’s largest organization focusing on safe and legal access to medical cannabis (marijuana) for patients and researchers for therapeutic purposes. Our comments will be brief and aimed at areas for improvement with regard to the Medical Marijuana Program (MMP).

We are aware that there a change in leadership within DOH towards the end of 2015. ASA would like to commend the new leadership for their efforts and openness towards finding ways to make the MMP work better for patients.

We would also like to encourage the Committee and full Council to pass the Medical Marijuana Laboratory Testing Amendment Act of 2015 (B21-0192). The Department of Health cannot adequately address issues such as accurate labeling and testing for contaminants without this bill. We also urge passage of the Medical Marijuana Cultivation Center Expansion Amendment Act of 2015 (B21-0257), which will help address supply. While there certainly has been an improvement in the available strains and products at District dispensaries, prices are generally the highest in the nation. Removing plant count limits will help, but the Council should also make additional improvements, such as lifting the requirement that patients designate a single dispensary to shop at. ASA looks forward to working with the Council on these improvements.

Program Specifics

We understand that the Department is close to unveiling its physician education program that is required under Section 805 of the MMP rules. ASA is pleased to hear of this development we intend to promote the program to District physicians. We hope that DOH also takes efforts to promote the physician medical cannabis education program. With the relatively low number of patients enrolled in the MMP, the reason is in part because there are relatively few physicians utilizing the program as part of their practice. In addition to this education program, we urge the Department to make this therapeutic option better known to licensed physicians and not merely those who seek recommendation form from the Department.
The current regulations do not allow for patients to return their medicine in the event that they find contaminants such as mold. As the program expands with more patients and cultivation centers grow more cannabis, the chances for issues with contamination will increase, and even when best efforts are put forth by all parties, recalls may become necessary. We encourage the Department to reexamine the issue of recalls and return of medicine within the regulations and would be happy to provide suggested regulatory language on these points.

The Department has within its power the ability to raise the patient possession limit to four ounces. ASA has heard from several dispensaries that approximately a third of their patients max out their two-ounce purchase limit per 30-day purchase limit. These patients are not being adequately served by the current possession limit and these patients may be tempted to augment their supply with unregulated sources. We urge the Department to raise the possession limit to four ounces within their rulemaking authority. Additionally, this is yet another reason why the MMP should eliminate the plant count language for cultivators.