

Connecticut Department of Consumer Protection

Medical Marijuana Program-Public Act 12-55

Board of Physicians

Minutes

May 8, 2013

Members Present: William M. Rubenstein Commissioner  
Dr. Jonathan Kost  
Dr. Robert Siegel  
Dr. Deepak Cyril D'Souza (Skype)  
Dr. David Greco (Skype)

Members Absent: Dr. Godfrey Pearlson

DCP Staff Present: Elisa Nahas Legal Director  
Claudette Carveth Director of Communications  
Xavier Soto Health Program Associate  
Peter Krzykowski Health Program Assistant

**Call to Order**

Commissioner Rubenstein called the meeting to order of the Board of Physicians for Connecticut's Medical Marijuana Program at 8:35 am at the Department of Consumer Protection, 165 Capitol Avenue, Hartford, Room 126.

**Approval of Prior Meeting Minutes**

On a motion made by Commissioner Rubenstein and unanimously voted, the draft minutes of the March 13, 2013 are accepted.

**Status Report on Program Implementation**

Approximately 530 patients have been certified. Over 350 cards have been issued and the rest are in the application process. The debilitating conditions for which patients are being certified continue to span across all categories with the bulk of registrations being: spinal cord injury with intractable spasticity, cancer, posttraumatic stress and multiple sclerosis. Approximately, eighty physicians have taken all the necessary steps to certify patients into the program.

## **Discussion of Rhode Island Regulations in Relation to the Connecticut Program**

The following question was raised by the Board: patients who reside in both Rhode Island (RI) and Connecticut (CT), can they obtain medical marijuana in RI?

Summarized reply by the Commissioner: RI has at least 1 dispensary and there are multiple caregivers who can grow the medical marijuana for RI patients (with a limit on how many patients are allowed per caregiver). Commissioner Rubenstein reiterated Connecticut's Medical Marijuana Program requirement which states; in order to be certified as a patient in CT the person needs to be a resident of CT, along with the other requirements. Connecticut statutes/regulations do not allow for dispensing to patients not registered with the CT program.

## **Discussion of Application Process**

The following question was raised by the Board: what is the number of rejected applications to date?

Summarized reply by the Commissioner: no patient or physician application has been rejected.

## **Proposed Regulation Update**

- A draft of the proposed regulations was issued in March.
- A public hearing related to the proposed regulations was held on April 22<sup>nd</sup>.
  - Transcript of the hearing is available on our website at [www.ct.gov/dcp](http://www.ct.gov/dcp), while the video is available on CTN at [www.ctn.state.ct.us](http://www.ctn.state.ct.us).
  - The hearing was represented by multiple groups including: patient advocates, patients, potential producers, potential dispensers, and community outreach groups.
- The Department has met internally, to review all written and oral testimony.
- Public hearing testimony and comments focused on the following:
  - Patients:
    - Process/desire to expand the list of debilitating conditions.
    - Encouragement to speed up the implementation of the program to as fast as possible, to ensure patient have an uninterrupted access to medical marijuana.
  - Potential Producers:
    - Unnecessary restriction to production, rigor related to laboratory requirement.
    - Unnecessary economic impediments to production.
  - Potential Dispensers:

- Extend the services a dispensary facility could offer to patients and expand the communication a dispensary would be allowed to have with a patient.
  - Community Groups:
    - Abuse
    - Diversion
    - Emphasis on making sure the program does not have any deleterious effect on teen access and marijuana use.
- Changes to the proposed regulation were incorporated into the draft, which was based on the public hearing testimony.
- The updated draft will be sent to the Attorney General's Office for review of legal sufficiency. This is not a review of the regulation, rather a review that the regulations meet certain legal requirements.
- The regulations will then be presented to the Regulation Review Committee for the Legislative Assembly on July 1, 2013. The Regulation Review Committee has a process which includes a review process of 60 days to have ample review time. The committee has an option to advance this schedule, however, due to the complexity of the regulations they most likely will use the entire 60 days.
- Changes to the regulations maybe substantive, but will not impact the process designated for the Board of Physicians for evaluating debilitating conditions.
- Changes considered (minor tweaks):
  - Changes to laboratory testing, to ensure the product has a consistent profile from month to month, for efficacy, safety and data collection.
  - Changes to how dispensaries may interact with patients.
  - Changes to economic requirements for producers.
  - Other changes were also considered.
- The hope of the program is that product cost will be competitive and will not compete with the black market. By design the program is intended to be competitive and have restrictions (limit the amount of product so as not to attract the potential for diversion), with the goal to deliver a safe product at the lowest possible cost.

### **Future Outlook**

- Medical Marijuana Program and Pharmaceutical Development. Whether or not the program is meeting patient needs is dependent on whether or not there are other options for a patient to meet their needs. In the future, a simulated product may exist, which has similar properties to marijuana. The risk that a pharmaceutical company develops a product that will compete directly with the medical marijuana program always exists, but is not available at the present and remains to be seen.
- The Board will be more active once the regulations have been reviewed by the Legislation. The Board will not be very active until the regulations go into full effect.

- The Department has an active search on for additional board members to have a full complement of 8 board members (per statute). Currently, the board has only five members.

### **Legislative update**

A Bill related to the Medical Marijuana Program was proposed, "*Bill No. 1117*". The legislature is considering the following changes to the existing program:

- Tax Medical Marijuana at the producer level
- Add to the list of debilitating conditions "Chronic Pain" which could be considered under certain circumstances

Currently, this Bill has not moved out of committee.

### **Regulation Comparison: Connecticut vs. Other States**

Connecticut is taking a dramatically different approach to Medical Marijuana. The department, in developing the regulations, used a controlled pharmaceutical substance model. This approach utilizes similarities from the pharmaceutical industry in understanding the product and the ingredients. The Connecticut model also, sets severe limitations on who may produce, limits the number of production facilities, and fairly stringent requirements on product analysis. Connecticut's approach is dramatically different than other states, which allows for higher degree of control over product diversion, abuse, quality and consistency.

### **Potential for the Board of Physicians to be involved in Educational Component of the Program**

There is no statutory mandate for the Board of Physicians to have an education component in the program. However, the design of the program encourages education develop and relies heavily on physician judgment, counseling, and risk and benefit assessment. There is an expectation that the program will work very closely and cooperatively with educational groups, similarly to what the Department's Liquor Division has done by working very closely with the Governor's Partnership on Prevention. It remains to be seen what obligation the dispensaries and producers will take on with regard to education. The application process will ask producers to outline their plans in this regard. Within the scheme of the program there are lots of opportunities to do that, including to the extent the board would like to generate public information and disseminate it to the public.

### **Adjournment:**

Commissioner Rubenstein adjourned the meeting at approximately 9:10 a.m.

### **Next Meeting:**

Scheduled for Wednesday, September 11, 2013 @ 8:30am, Room TBA.