

Dual Use of Cannabis Task Force Meeting

April 25, 2022

12:00 p.m. – 2:30 p.m.

Hawaii State Art Museum - Multipurpose Room, 1st Floor

No. 1 Capitol District Building, 250 South Hotel Street

Honolulu, Hawaii

Task Force Members & Presenters in Attendance (in alphabetical order)

TASK FORCE MEMBERS		
Name	Title	Organization/Representing
Isaac Choy	Director	Department of Taxation
Randy Gonc	Executive Director	Hawaii Cannabis Industry Association
Garrett Halydier, Esq.		Adult Use Legal Scholar and Proponent
Dori Palcovich	Economic Development Specialist	Department of Business, Economic Development & Tourism
Nikos A. Leverenz	Grants and Advancement Manager	Hawaii Health and Harm Reduction Center/Patient Advocate
Michele N. Nakata	Chief	Office of Medical Cannabis Control and Regulation, Department of Health
Jared Redulla	Chief Investigator, Narcotics Enforcement Division	Department of Public Safety
Wendy Gibson-Viviani	RN, BSN	Patient Advocate
PRESENTERS		
Gillian Schauer	Executive Director	Cannabis Regulators Association (CANNRA)
Danette Wong Tomiyasu	Deputy Director of Health Resources	State of Hawaii Department of Health

Task Force Members Participating via Zoom (in alphabetical order)

Name	Title	Organization
Joy A. San Buenaventura	Senator	Hawaii State Senate
Ellen Ching	Administrator Boards and Commissions	County of Kauai

Terilynne Gorman	Communications Team Member	County of Maui
Dr. James Ireland	Director	Honolulu Emergency Services Department, City and County of Honolulu/Certifying Medical Provider
Barett Otani	Executive Assistant	County of Hawaii
Jo Ann Uchida Takeuchi	Deputy Director	Department of Commerce and Consumer Affairs
Ryan I. Yamane	Representative	Hawaii House of Representatives

Call To Order

Michele Nakata, Chief of the Office of Medical Cannabis Control and Regulation at the Department of Health, called the meeting to order and welcomed attendees to the first meeting of the Dual Use of Cannabis Task Force meeting.

She introduced Danette Wong Tomiyasu, Deputy Director of Health Resources at the Department of Health.

II. Welcome Address – Department of Health

Ms. Tomiyasu welcomed the Task Force members and reviewed SB1139, SD 2, HD1 CD1 which was enacted as Act 169 Session Laws of Hawaii 2021. Act 169 charged the Department of Health with convening a Task Force to “explore the development of a dual system program of legalization for cannabis” – in other words legalized adult- and medical-use – and the impacts of legalization on qualifying patients. She emphasized that the Task Force will not debate or decide whether Hawaii should or should not legalize cannabis for adult-use. Rather, the purpose of this Task Force is to identify the key issues and concerns that should be considered if Hawaii were to legalize adult-use cannabis and the potential impacts to access to medical cannabis by qualifying patients. The findings and recommendations of this Task Force will be reported to the 2023 Legislature.

III. Introduction of Task Force Members

Ms. Tomiyasu introduced the meeting facilitator, retired Judge Michael Broderick, and the recorder, Jennifer Cornish Creed.

She identified the following categories represented on the Task Force:

- State Senate and State House
- Counties
- Department of Business, Economic Development, and Tourism

- Department of Commerce and Consumer Affairs
- Department of Health
- Department of Public Safety
- Department of Taxation
- Cannabis Industry
- Adult Use Legalization Scholar
- Medical Professionals

She thanked the Task Force members and wished them a productive dialogue and meeting. Ms. Nakata then introduced the members of the Task Force.

IV. Review of Hawaii Sunshine Law Requirements for Public Meetings

Andrew Goff, Deputy Attorney General, Health and Human Services Division, Office of the Attorney General, provided an overview of Hawaii's Sunshine Law Requirements for public meetings, highlighting the following:

- Every one of the Task Force members are now members of a government Task Force so the Sunshine Law applies.
- The [OIP website](#) has information and guidance on the Sunshine Law. Task Force members can also reach out to Andrew if they have any questions on whether something is appropriate or not.
- The Task Force business must be done in open meetings. The Task Force has broad authority under Act 169 and everything relating to that authority is subject to the Sunshine Law.
- Notice of meetings will be given and the meetings will be open to the public.
- It is permissible for 2 members to discuss Task Force business by phone or email at any time, but they can't commit or seek a vote. Also, it can't be serial.
- At some point, Investigative Committees may be set up during open meetings and we will identify the scope and members of the Investigative Committees. Those members do their investigation and come back and report their findings to the full Task Force who will then discuss the findings.
- Investigative Committees must have less than a quorum (in this case less than 8 people) on them.
- Once an Investigative Committee presents, the Committee is dissolved.
- Events – a number of members less than a quorum may attend informational events that are related to the Task Force's business but may not or curry a vote. The event can't be specifically aimed at Task Force members and Task Force members can only discuss things at the event that are relevant to the event. Task Force members who attend such events must report back to the full Task Force at the next meeting.
- Closed meetings – the Task Force may choose to have an Executive Session to communicate with their attorney regarding legal matters. If there is a legal question, the Task Force may move into Executive Session.

- Public notice must be given in 6 calendar days in advance of all meetings. Agendas with items listed must be shared. If an item is not on the agenda, the Task Force shouldn't discuss it. You can add an agenda item if there is a 2/3 vote to do so, but it can't be something substantive, it can only be procedural.
- Public testimony must be allowed on all agenda items.

V. Public Testimony on Agenda Items

List of Testifiers (Participating in Person and via Zoom) (in alphabetical order)

Name	In Person or Online?
James Anthony	Online
Robert Bence	Online
Rick Collins	Online
Georgianna DeCosta	Online
Margaret Dorsey	Online
Scott Goold	Online
Richard Eckert	In Person
Jason Hanley	Online
Jacqueline Moore	In Person
Chey Moseman	In Person
Brent Norris	Online
Clifton Otto	Online
Sidiqa	Online
Julie Sharrer	Online
Andrew Simmons	Online
Greg Tjapkes	Online
James Trice	Online
DeVaughn Ward	In Person

Public Testimony

Judge Broderick invited those testifying in person to go first.

- Jaqueline Moore, PharmD, testified in support of “responsible use of the Dual Use Task Force, especially as it relates to the Adult Use program and ensuring that patients are still accessing dispensaries.”
- Chey Moseman, Hawaii Island, shared that he is a resource and was available to answer any questions the Task Force had.
- DeVaughn Ward, Marijuana Policy Project, testified that they are a resource to the Task Force. They have a lot of data and can share research on any issue related to legalization. He encouraged the Task Force to look at the issue of social equity. Hawaii has the opportunity to do this in a unique way regarding restorative justice to the Native Hawaiian community.

Q: (Jared Redulla) Can you share about jurisdictions that have models of good social equity programs?

A: New York is using an administrative agency to create a 1-time license for existing hemp growers to transition to adult use. New Jersey and Connecticut are also doing some good work. No one state has gotten it 100% right.

Q: (Jared Redulla) Which ones are working on social equity with respect to folks with prior convictions?

A: It wasn't around when Colorado instituted dual use. New York is the only one doing that.

Q: (Director Choy) Does MPP have a website? Statistics we can look at?

A: Yes, mpp.org. We have statistics on tax rates, personal possession limits, etc. The statistics are from the state itself (provided by the statute or regulatory body).

- Richard Eckert, Hawaii Medical Cannabis Patient Group, testified in support of patient's rights. Senator Brian Schatz co-introduced a federal notice of special interest. Let's lead the nation in this conversation. People will have access to the finest cannabis in the world, but please do your research.

Judge Broderick then invited those testifying via Zoom to go next.

- Robert Bence testified as an advocate for severely disabled local medical use patients that are long-time Hawaii residents.
- Jason Hanley, owner of Care Waialua Farms, testified that their organization services disabled and elderly folks who can't afford the dispensaries. He invited the Task Force members to come and see the co-operative farm and how safe, educational and positive it is for the community. He testified in support of a medical bill (like in Maine) that

provides jobs for the community. The vertical dispensary model is failing.

Q: (Wendy Gibson-Viviani) How concerned are you about the law ending cooperative growth in 2023?

A: (Jason Hanley) Definitely concerned. There's lots of testimony with DOH saying only 10% of licenses are cooperative growth licenses, but that's 3,000 to 4,000 patients that will be without medicine. We open our doors to everyone and we're helping many people. That law would be very detrimental. I would ask the Task Force to please take a look at this law.

- Georgianna DeCosta testified as a former methamphetamine and heroin addict and chronic pain sufferer.
 - For folks with drug addiction and substance abuse history who have chronic pain, medical cannabis is the only safe alternative.
 - The options that promote equity are advocating for cooperative growing sites rather than dispensaries.
 - Support prescription medication programs, ensure cooperative growth options and keep purely recreational users out of it.
 - Use a harm reduction model now. We need a pono program for all.

Q: (Dori Palkovich) It sounds like we should research Maine. What was the other state?

A: New York.

- James Anthony, long-time Hawaii resident and cannabis attorney California, testified that this was a historic occasion.
 - On the social equity matter, the War on Cannabis has imprisoned many people, including many Native Hawaiians. We should prioritize social equity and legalize ONLY in that framework (it won't work in a highly regulated system).
 - He urged the Task Force to investigate options and present them to the Legislature. California has made a complete disaster of this.

Q: (Wendy Gibson-Viviani) I'm wondering if you can tell us which states have good social equity models?

A: None really. It is predominantly black and brown people in prison. New York is the best out there at the moment. This is a \$69 billion industry in the U.S. We should not persecute the growers. It has been legalized for 10 years in some states and there isn't blood running in the streets. Oklahoma is another possible model. They have low barriers to licenses. You should seriously consider not limiting the number of licenses, but if you have to limit them, then you should prioritize folks who have been impacted by social equity issues.

- Andrew Simmons thanked the Task Force members for their time and acknowledged they have a tough job ahead of them. He agreed that this is a historic moment for Hawaii.
 - We have some of the best cannabis. Eventually it will be legalized at the federal level. We need to be set up for that opportunity when it comes – folks will want Hawaii grown cannabis.
 - I encourage you to think this through. It is a major opportunity for income production.
 - Consider social equity licenses for Native Hawaiian patients – those most impacted by the War on Drugs.
 - Consider micro-tiered licenses.
 - There should be a crowd funding site that can invest money in Hawaii businesses, otherwise it is mainly mainland investors that will profit. Multi-state operators will buy licenses from social equity licensees and take away from those in need. The money will leave Hawaii.

- Scott Goold, a public health professional, testified that he’s seen folks selling pakalolo – petty street criminals – who made \$3-400 in an hour. He spoke to law enforcement about it and they asked if there were any other drugs (like Meth.) involved. If so, they said they’d respond, but only if we saw other drugs.
 - He advocated for legalization because a regulated market protects us.
 - There are 35,000 patients in Hawaii that are using responsibly.

- Margaret Dorsey testified that it is imperative that the Task Force focus on patients.
 - We make no money from this.
 - She is a mother of 3 living with Lupus and in chronic pain. Cannabinoids can address the pain.
 - Local growers are not currently in all rural areas.
 - With legalization, it’s not a matter of “if”, it’s “when”.
 - We need to treat all medical conditions that qualify which requires a steady, affordable supply of cannabis.
 - Please help us be able to afford this medicine.
 - It’s very wrong that we have 329 patients on Hawaii Island that are separated from their children.

- Brent Norris, founder of Lau Ola/dispensary licensee, testified that he won a dispensary application but when they did a background check they found a cannabis infraction and they were asked to deny his employment at the dispensary.
 - We need to adhere to the Americans with Disabilities Act (ADA) for those with disabilities during these meetings by having signing during the meeting and the Chat function enabled; a link available in all the notices of meetings.
 - Outside influences have bought all our dispensaries. We need to reel the program back in. There are 200,000 more consumers. Will need the whole market to grow.

- Rick Collins, Hawaii Public Health Institute, shared that they are taking a neutral stance but implore the Task Force to include public health regulation. He would be happy to provide recommendations and be a resource in this regard. HIPHI has previously opposed dual use. We recommend DOH be in place to protect.

Q: (Jared Redulla) What about criminalization? Does HIPHI recognize significant harm to individual families and community from having people imprisoned for use of cannabis?

A: Yes, we would afford decriminalization of possession. There is an annual Public Health Institute – Cannabis Moving Forward.

- Dr. Clifton Otto testified on agenda item #3. I didn't hear anything about a certifying physician on the Task Force. We know the most about patients. You should consider voting a certified physician and an APRN onto the Task Force. Regarding agenda item #6, you should consider creating an Investigative Committee to look into how to end the federal conflict. Our Legislature needs support on this.

Q: (Wendy Gibson-Viviani) Do you have suggestions on which physicians or nurses should be included?

A: I suggest a CP and APRN that are in favor of the dual use system.

At this point in the meeting, Chair Michele Nakata noted that the meeting end time was near but due to the technical difficulties at the beginning of the meeting, the meeting would continue until there was no longer quorum.

- Julie Scharrer noted that she would have liked to chat to Mr. Anthony. She shared that her husband is very ill and doesn't have long to live. She needs someone to help her make some critical decisions. She is in support of a CP and APRN being on the Task Force. She's concerned about the removal of the caregiver program.

C: (Michele Nakata) You can contact the Department of Health to get that information.

- Sediqa shared that her husband is an anesthesiologist that does medical cards. She advocated for him to have a seat on the Task Force.
 - This would be significant because of the many military families and veterans that could be served by him being on the Task Force.
 - She urged the Task Force to pay attention to the resources in the community and to consider the New York and Maine models.

C: (Director Choy) We do have Dr. Jim Ireland on the Task Force.

- James Trice, combat medic and patient advocate as well as advocate for spouses and dependents of patients, shared the following testimony:
 - He is in support of medical use

- Without research, he's not in support of recreational use
 - We need to work on decriminalizing possession
 - People on fixed incomes can't afford the dispensary prices
 - People have a right to grow
 - We should look at the Oklahoma model and also Puerto Rico and Virginia where they have rural areas and smaller population densities as models regarding workforce development
 - He supports a 329 program which would open things up for disabled vets, Native Hawaiians, etc.
- Greg Tjapkes, Executive Director of the Coalition for a Drug Free Hawaii, shared the following testimony:
 - I agree that the medical program is important, and that decriminalizing is important
 - Of adolescents in treatment, 60% are there for cannabis use and it does often convert to meth use as they become older
 - Alcohol, tobacco and marijuana are all entry drugs for adolescents
 - 90% of substance abuse disorders start in adolescence
 - If you ask the police, doctors, the Department of Transportation, they're against it
 - Ask any doctor at the John A. Burns School of Medicine (JABSOM) about cannabis policy
 - Please consult the experts
 - We have to think about what the societal costs will be

VI. Presentation on other States' cannabis programs by Gillian Schauer, Executive Director, Cannabis Regulators Association (CANNRA)

Ms. Gillian Schauer, Executive Director, Cannabis Regulators Association (CANNRA), gave a presentation to the Task Force that provided an overview of states' cannabis programs. She shared that CANNRA convenes 43 different states and is a nonpartisan nonprofit organization. They are not for or against. They provide learning for those who are considering legalizing. Her slide deck will be posted on the DOH Dual Use Task Force webpage at: [Medical Cannabis Program | Dual Use of Cannabis Task Force \(hawaii.gov\)](#)

VII. Discussion regarding presentation by Gillian Schauer

After the presentation, Ms. Schauer answered questions posed by the Task Force members.

Q: Will we get a copy of the presentation?

A: Yes, and there's an article that the Task Force has access to.

Q: Are we able to ask additional questions as we read through the materials?

A: Yes.

Q: (Jared Redulla) I have a question about uniformity in regulation within a state. California is a patchwork. You may have to travel far to access. What states have done a good job with uniform regulation and with tax revenues?

A: California is an outlier in the significant amount of localities with control. The norm is that localities have authorization over time, place and manner. California counties get big chunks of revenue because they are also regulating. New Jersey has a good model. California, New Mexico and Illinois all have tax revenues going to local government.

Q: (Director Choy) There are 20 states that have already legalized adult use. What's the trend?

A: The trajectory is from nothing to full adult use. The norm is medical use to full adult use. There is a state-by-state approach. There are pieces from different states that are good, but no one program is perfect.

Q: (Isaac Choy) Is there an organization that shares best practices?

A: CANNRA is working on this.

Q: (Director Choy) Is the purpose to force federal regulation changes in the future?

A: (Michele Nakata) The focus of this Task Force is the state.

C: (Dori Palcovich) What 2-3 issues should we investigate? These are the three I'm hearing:

1. Protect consumer safety
2. Promote social equity
3. Consider viable revenue models

Q: (Wendy Gibson-Viviani) Have states considered a website to access for drug information (e.g., drug interactions)?

A: States that have required information packaging of products usually list the Poison Control Center. There is discussion of a website that shares adverse events. The FDA is looking at this.

Q: (Barett Otani) What about states like Seattle and others in the Pacific Northwest that have a Vision Zero policy?

A: You're talking about traffic safety. I don't know about Vision Zero but can share that there are challenges with traffic safety issues. Most states allocate funds for traffic safety. ARIDE and DOE are roadside test systems but no blood or saliva tests are effective. I can put you in touch with folks who have more information.

Chair Michele Nakata shared that due to the time, the last agenda item, **Discussion regarding identification of key cannabis policies for further Task Force investigation**, would be moved to the next meeting.

She asked the Task Force members to please consider the information Gillian provided and consider their role and subject matter you represent. For the next meeting, she asked them to come prepared to identify policy issues for this Task Force to work on. We want to identify priorities because we may not be able to cover all the issues. She noted that she would be asking Task Force members to take assignments and lead workgroups to learn more and report back.

III. Next Meeting: May 23, 2022

The next meeting will be on Monday, May 23, 2022 at 12 noon. The meeting was adjourned at 2:31 p.m.