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Health Committee

HB60 134th GA
Proponent Testimony

Good afternoon, Chair Lipps, Vice Chair Holmes, Ranking Member Russo, and members of the Health Committee. Thank you for allowing my proponent testimony today for House Bill 60 of the 134th GA, which would allow individuals with Autism Spectrum Disorder to qualify for medical cannabis in Ohio.

My name is Tim ...

I'm not here to present more medical research and trial articles to solidify the need for Autism Spectrum Disorder, "ASD". As I believe a preponderance of evidence to add ASD as a qualifying condition to the Ohio Medical Cannabis Control Program has previously been submitted not only in the creation of the program but as well in the first three open submission periods. My reason for testifying today is to present the "WHY" so many have reached out to their legislators and the General Assembly for help to accomplish the addition of ASD to the qualifying list.

In January 2016 the "State of Ohio Senate Medical Cannabis Listening Tour" was launched by Senator Burke and Senator Yuko visiting the Universities of Cleveland, Toledo and Cincinnati to listen to the testimonies of patients and caregivers as to their stories of how medical cannabis has changed, improved and in some cases saved their lives respectively with numerous physical and mental ailments. Dozens of ailments/conditions were presented with ASD being mentioned numerous times.

Around the same time four separate committees endured several weeks of testimonial input with the presentation of medical cannabis articles, studies, trials and research from cannabis experts around the world. Again dozens of ailments/conditions were presented including ASD.

On June 8th, 2016 HB523's (Ohio's Medical Cannabis Program) was signed into law by Governor Kasich. HB523 was then assigned to the controlling regulatory boards who were given a two year timeline to promulgate the program rules and procedures with an expected opening date of September 8th 2018. As of today, several licensees are still in the process of qualifying to be operational. Perhaps a timeline sign of procrastination to slow the progress of the program and certainly not the intent in its creation.

In 2019 at an OSU event addressing the status of the program, representatives from all three regulatory boards provided updates and input. In the QA wrap up, the boards were presented the questions of WHY not more patient protection rights, WHY not adding conditions, WHY no public service announcements and WHY no industry marketing. A swift response from the OBP and the MBO directors said that if you want any changes made in the program address them with your legislators. The "WHY'S" as to why I am here.

As we have experienced, the over-regulated program rules and procedures make it virtually impossible to amend or adopt new language by patients, licensees and industry experts. It is quite apparent that any rule changes will come from the boards or through the legislative amendment process only. The program has seen one condition added in the first three submission periods out of dozens that have been submitted. Conditions/ailments suggested per HB523, through best practices and testimonies, were revised by the board's best practices research. Many conditions were simply arbitrarily redacted with prejudice of having not met the criteria set forth by the boards.

So we ask why...

Why has the program not added more conditions?

Certainly numerous requests have been submitted with the supportive sciences. A clarification of conditions vs categories needs addressed may help.

Why are submitted conditions/ailments dismissed?

Aside from the process itself, rules to add conditions make it difficult. The current board overseeing the adding of qualifying conditions share a lack of medical cannabis knowledge themselves impairing their decision making process.

Why is the program Advisory Board not heard?

With their wealth of knowledge respectively to their disciplines it appears they are simply a board of formality and not action.

Why do we advocate for more conditions to be added through the legislative process?

To be heard and not dismissed from the moral stigmas and propaganda of cannabis still present in the minds of decision makers.

And we advocate for the patients who find relief in the use of medical cannabis rather than RX drugs. We advocate for the health of patients. We advocate for conditions like ASD, opiate use disorder, anxiety and more that are not clearly identified as a qualifying condition. We advocate and solicit the help of our legislators because it is what we have been guided to do. We advocate because it is the right thing to do. Who is better to ask than a patient themselves with an ailment finding relief in the use of medical cannabis when it comes to adding conditions?

In Safety

Tim

Tim Johnson

Founder/Safety Security Specialist



Program patient numbers as of February 2021 ... 3mil eligible patient pool in Ohio from the 21 conditions ... 230k recommended ... 168k registered ... 149k purchasing ... 80k not participating (WHY)