

HEALTH  
RESOURCES  
ADMINISTRATION

HAWAII  
DEPARTMENT OF  
HEALTH

# Hawaii's Medical Cannabis Program

State Epidemiological  
Outcomes Workgroup  
May 28, 2021

# Medical Cannabis States Timeline

## 1996 – 2002

- Total of 8 states
- Alaska, California, Colorado, Hawaii, Maine, Nevada, Oregon, and Washington

## 2002 - 2008

- Total of 13 states
- Michigan, Montana, New Mexico, Rhode Island, and Vermont

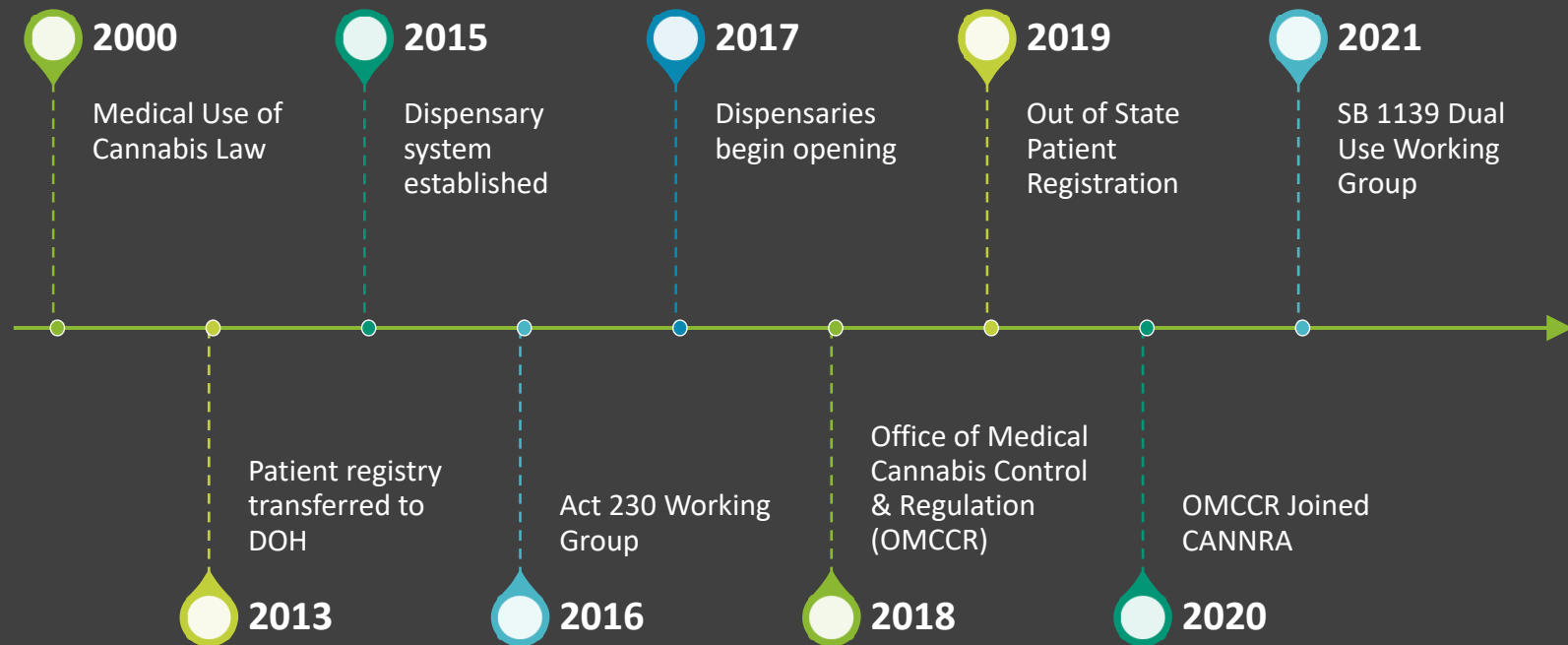
## 2009 - 2013

- Total of 20 states (plus DC)
- Arizona, Delaware, District of Columbia, New Jersey, Connecticut, Massachusetts, New Hampshire, and Illinois

## 2014 – 2020

- Total of 47 states (plus DC, CNMI, Guam, Puerto Rico, and USVI)
- Arkansas, CNMI, Florida, Guam, Louisiana, Maryland, Minnesota, New York, North Dakota, Ohio, Pennsylvania, Puerto Rico, USVI, and West Virginia
- CBD-only laws: Alabama, Georgia, Indiana, Iowa, Kansas, Kentucky, Mississippi, North Carolina, South Carolina, Tennessee, Texas, Virginia, Wisconsin, and Wyoming

# Hawaii's Timeline



# Office of Medical Cannabis Control & Regulation (OMCCR)

## Mission

- Ensure safe access to medical cannabis for qualified patients

## Guiding Principles

- Patient safety - Product safety  
- Public safety

## Two Sections

- Patient Registry
- Dispensary Licensing

# 329 Patient Registry - Eligibility

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IN STATE ELIGIBILITY	OUT OF STATE ELIGIBILITY
Certified as having one or more debilitating medical conditions recognized in Hawaii	
Valid ID	Valid state ID or drivers license from the patients home state/territory
Certified by a licensed physician/advance practice registered nurse (APRN)	Valid Medical Cannabis Registration card issued by the patients home state/territory

# Qualifying Debilitating Conditions

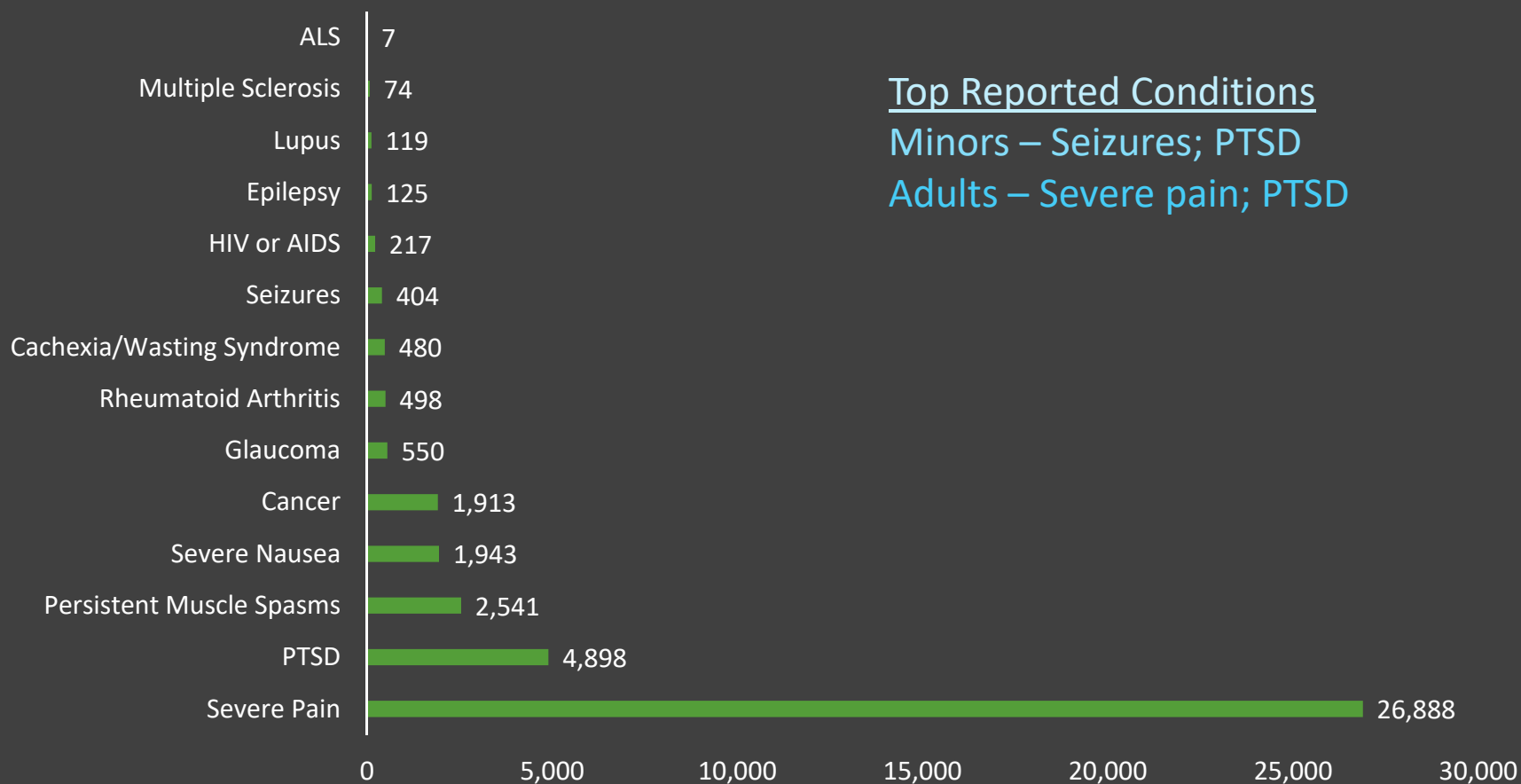
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- Amyotrophic Lateral Sclerosis (ALS)
- Cancer
- Epilepsy
- Glaucoma
- HIV/AIDS
- Lupus
- Multiple Sclerosis
- Post Traumatic Stress Disorder (PTSD)
- Rheumatoid Arthritis
- A chronic or debilitating disease or condition that produces one or more of the following:
  - Cachexia or wasting syndrome
  - Severe pain
  - Severe nausea
  - Seizures
  - Severe & persistent muscle spasms (e.g., multiple sclerosis or Crohn's disease)

# Patient Distribution by Condition

Patients may be diagnosed with more than one condition

March 31, 2021



# 329 Registration Process

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Make an appointment to a certifying medical provider



Patient completes online application at:  
<https://medmj.ehawaii.gov/medmj/welcome>



Physician/APRN certifies medical condition



DOH reviews, approves, emails link to e-card



# Hawaii 329 Registration Card

## In-State Patient Sample 329 Card

### State of Hawaii 329 Medical Cannabis



Registration Number: 2019000067

Start Date: 09/30/2018 Expiration Date: 09/30/2019

Patient Last Name: Doe

First, Middle, Suffix: John A

Date of Birth: 01/01/1970

Caregiver Last Name: Smith

First, Middle, Suffix: Jane A

Date of Birth: 02/02/1975

Physician/APRN Name: /s/ EDNA J SMITH, APRN

### State of Hawaii 329 Medical Cannabis



Grow Site:

9876 Hawaii Street Honolulu 96822

The Medical Cannabis Program is managed by the Hawaii State Department of Health.  
Information Hotline: call (808) 733-2177 for general information about the program.

# 329 Patient Registry - 2021

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Average number of in-state applications:

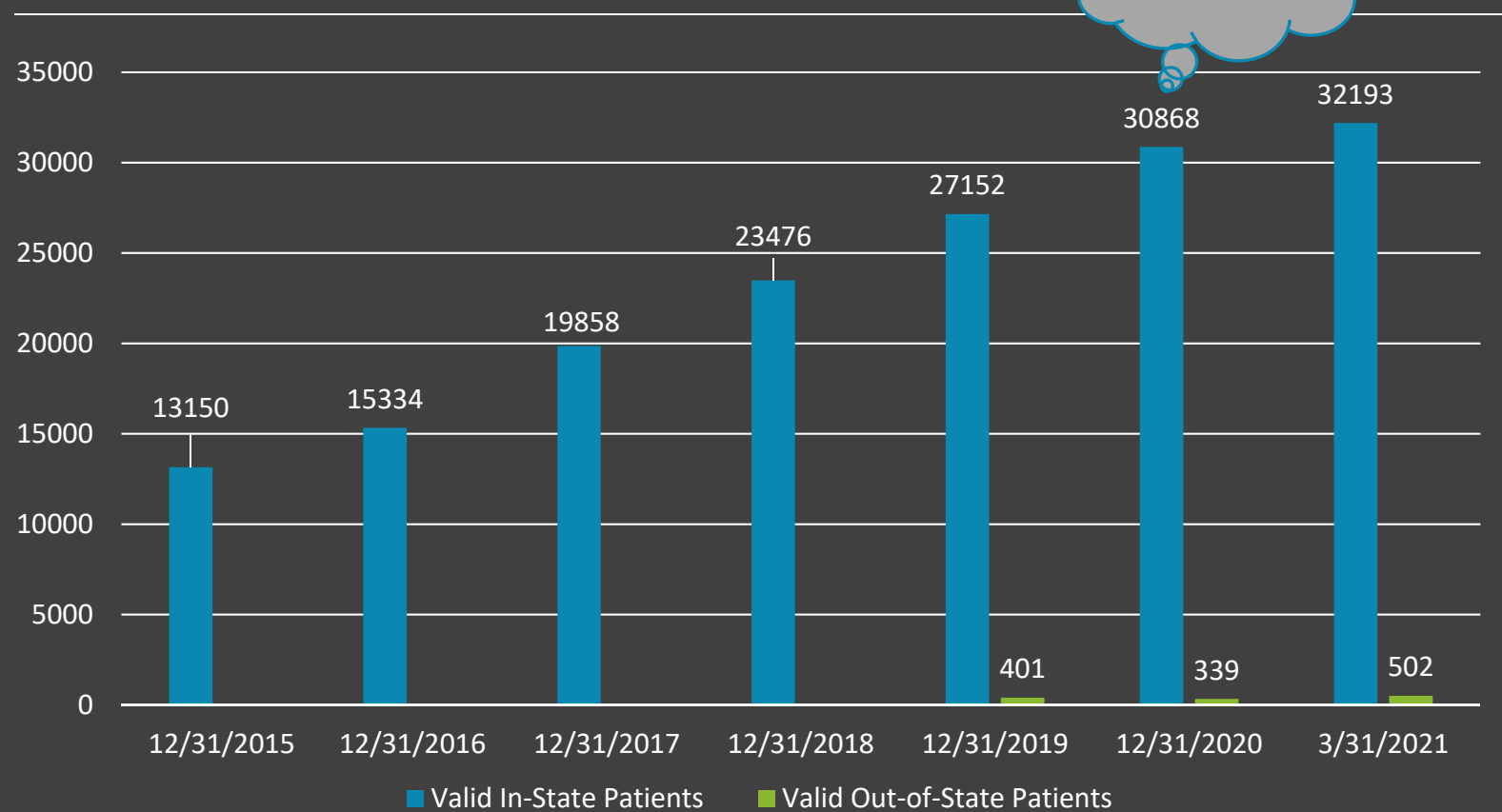
- Received 2266/month
- Processed 2195/month

Average number of out-of-state applications:

- Received 315/month
- Processed 257/month

Average turnaround time: 3-5 business days

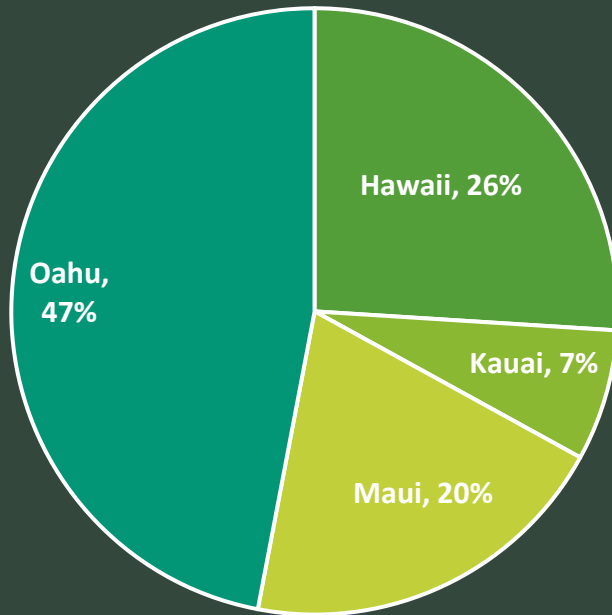
# Valid Patients by Year



# Patient Registry Program

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Patient Population by County



## Average In-State Patient

- Is male (59%)
- Over 45 years of age (58%)
- Lives on Oahu (47%)
- Has severe pain (84%)

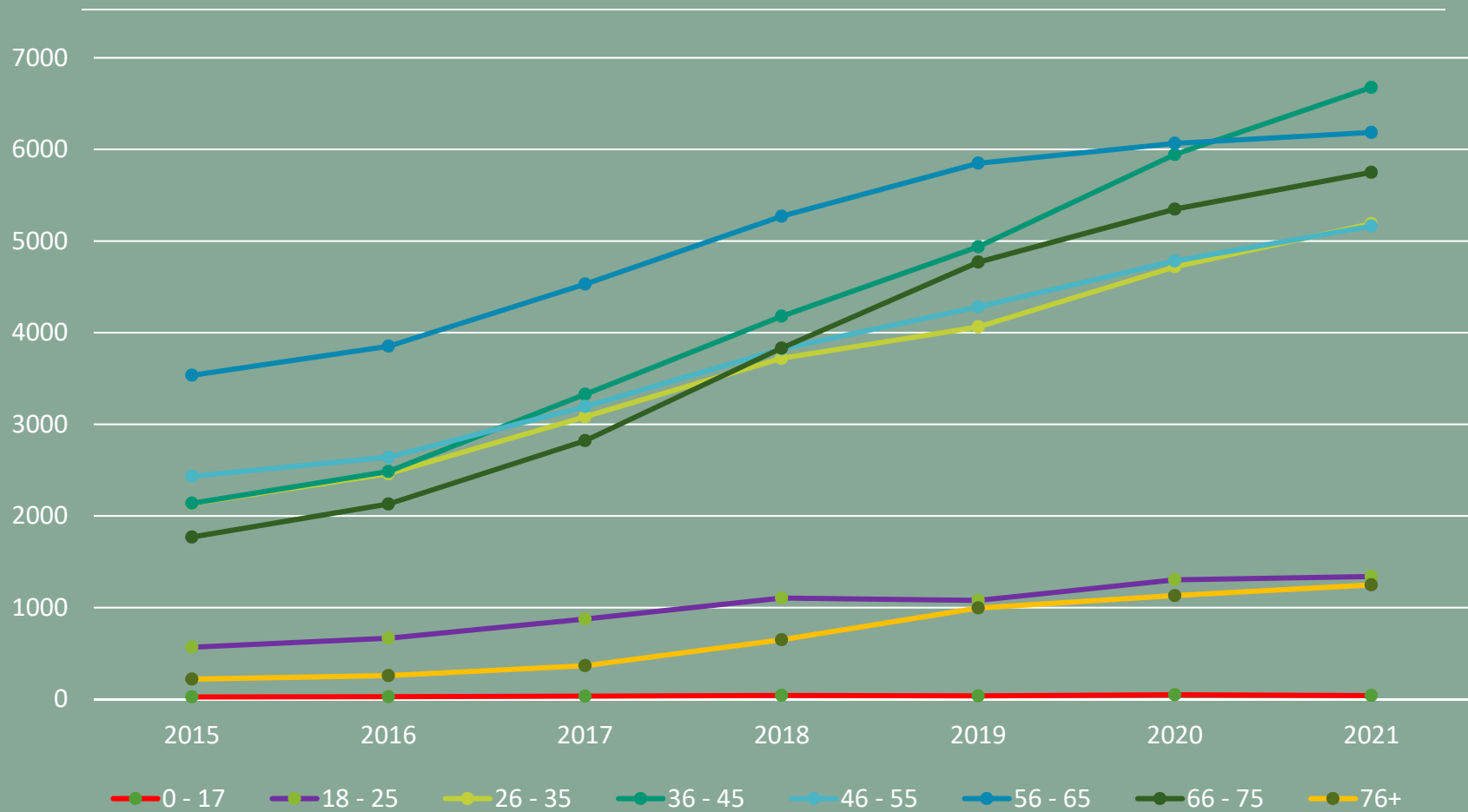
**32,193 In-State Patients**  
**March 31, 2021**

32,193 In-State Patients March 2021

Oldest is 101

Youngest is 5

# Patients by Age



# Medical Cannabis Use

§329-121 Definitions: “Medical Use” means...

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**Acquisition**



**Cultivation**



**Distribution**



**Possession**



**Use**



**Transportation**

...of cannabis or paraphernalia relating to the administration of cannabis to alleviate the symptoms or effects of a qualifying patient's debilitating medical condition.

# Conditions of Use

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- No acquiring, possession, cultivation, use in public places
- No use in any way that “endangers the health or well-being of another person”
- Must be transported in sealed container, not be visible to public, & not removed from the container while in public
- No protection of State laws if transported inter-island
- Patient registrations & grow sites subject to verification
- Complaints investigated by law enforcement
- Patients are required to carry their 329 card & valid ID whenever they are in possession of medical cannabis
- All Smoke Free Laws apply



# Patient and Caregiver Protections

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## §329-125 Patients and Caregivers

(a) may assert the medical **use** of cannabis as an affirmative defense to any prosecution involving cannabis under this [part] or part 712

(b) any patient or caregiver “not complying with the permitted scope of the medical **use** of cannabis shall not be afforded the protections against searches and seizures pertaining to the misapplication of the medical **use** of cannabis.”





# Additional Patient and Caregiver Protections

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Act 242 – effective July 1, 2015:

§329-125.5: Non-discrimination based solely on status as patient or caregiver for:

- School Enrollment or Housing: no school shall refuse to enroll...and no landlord shall refuse to lease property unless it would cause the school or landlord to lose a monetary or licensing related benefit under federal law.
- Medical Care: shall not constitute the use of an illicit substance or otherwise disqualify a registered qualifying patient from medical care, and
- Custody: provided that the patients' or caregivers' conduct did not create "a danger to the safety of the minor"

There is neither protection for patients in employment situations nor a requirement for DOH to verify type of employment prior to issuing 329 cards.



# Medical Cannabis Use

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## Registered patients may:

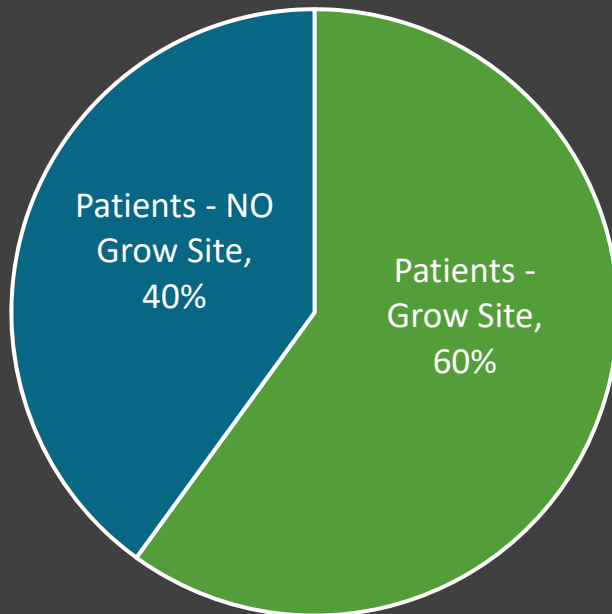
- Grow no more than **10 plants** at a single location
  - Tagged with the patient's registration number and expiration date
- Possess no more than **4 ounces of usable cannabis**
- Purchase medical cannabis from a dispensary
- Designate a caregiver – ratio 1:1

# Medical Cannabis Use

Grow Sites and Caregivers as of March 31, 2021

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Grow Sites



2,670 or 8% of registered patients have a caregiver

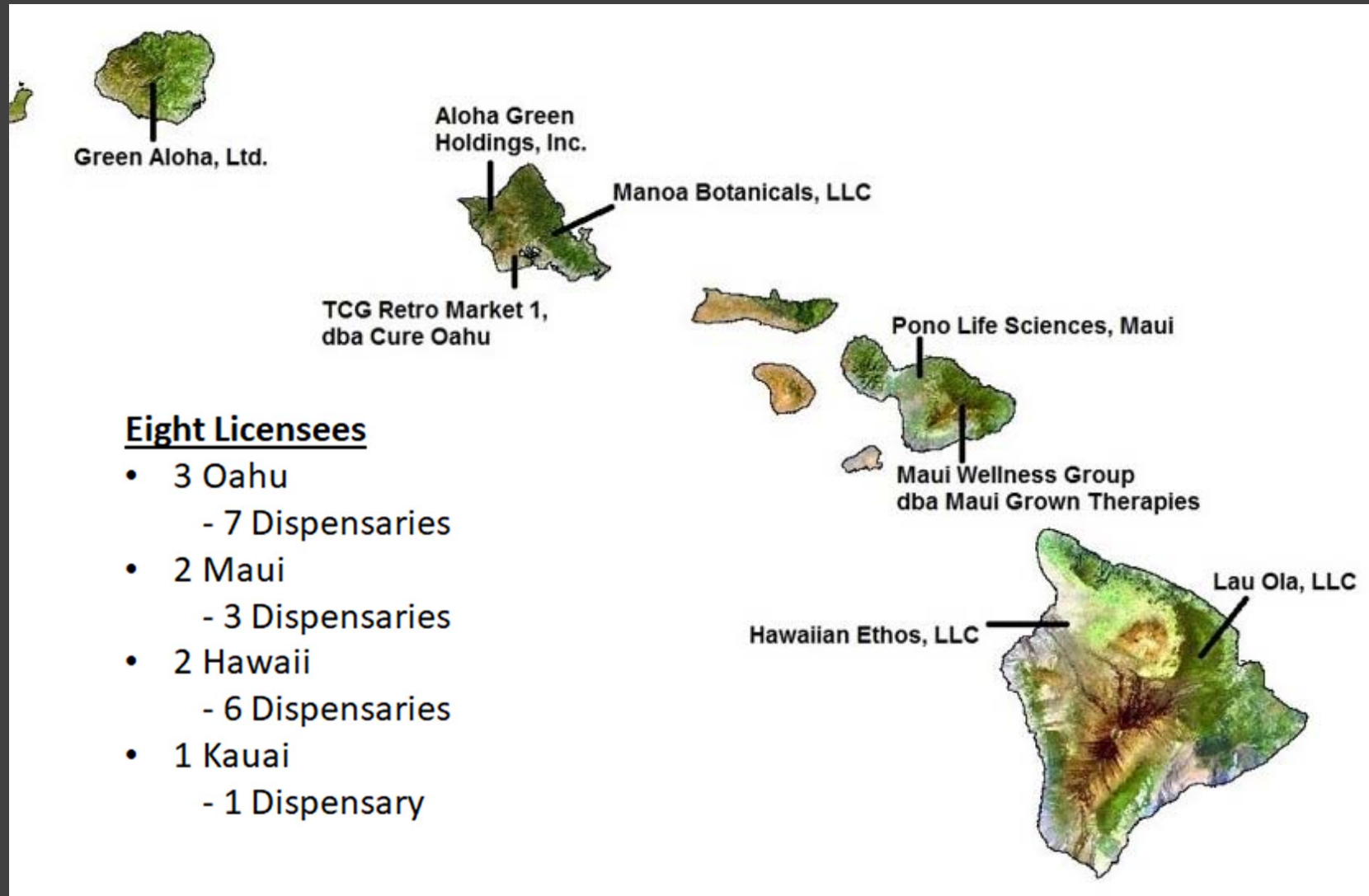
## Caregiver's By County

- Oahu – 53% or 1,405
- Hawaii – 20% or 534
- Maui – 21% or 557
- Kauai – 7% or 174



## Dispensary Program





# Electronic Seed to Sale Tracking

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Cultivation

Harvest

Flowers &  
Products

Lab  
Testing

Retail

Patient



# Quality Assurance Testing

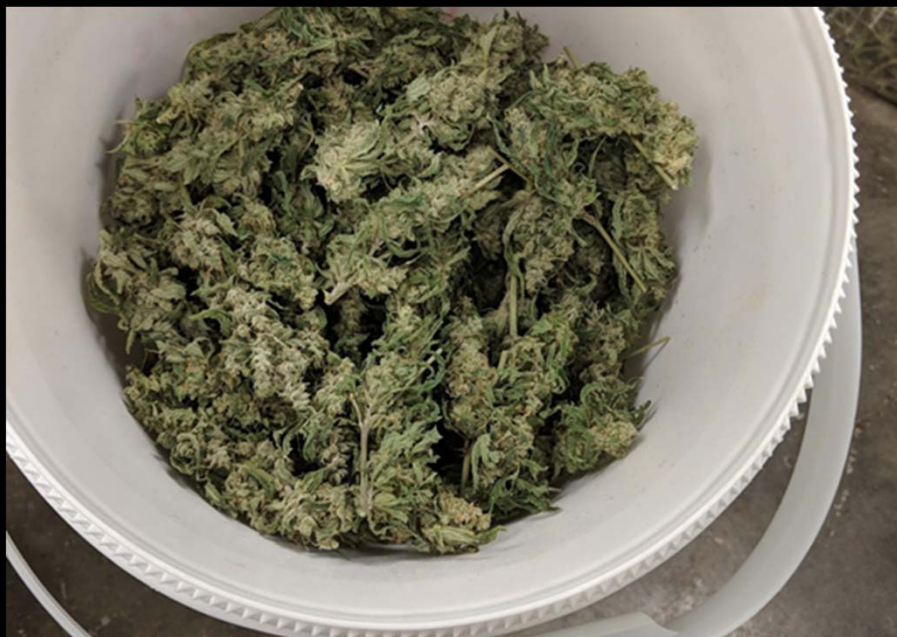
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- Potency – THC, CBD, etc.
- Heavy Metals, Pesticides, Solvents
- Microorganisms – bacteria, molds, yeast
- Mycotoxins
- Visible foreign or extraneous material
- Moisture content













# Products

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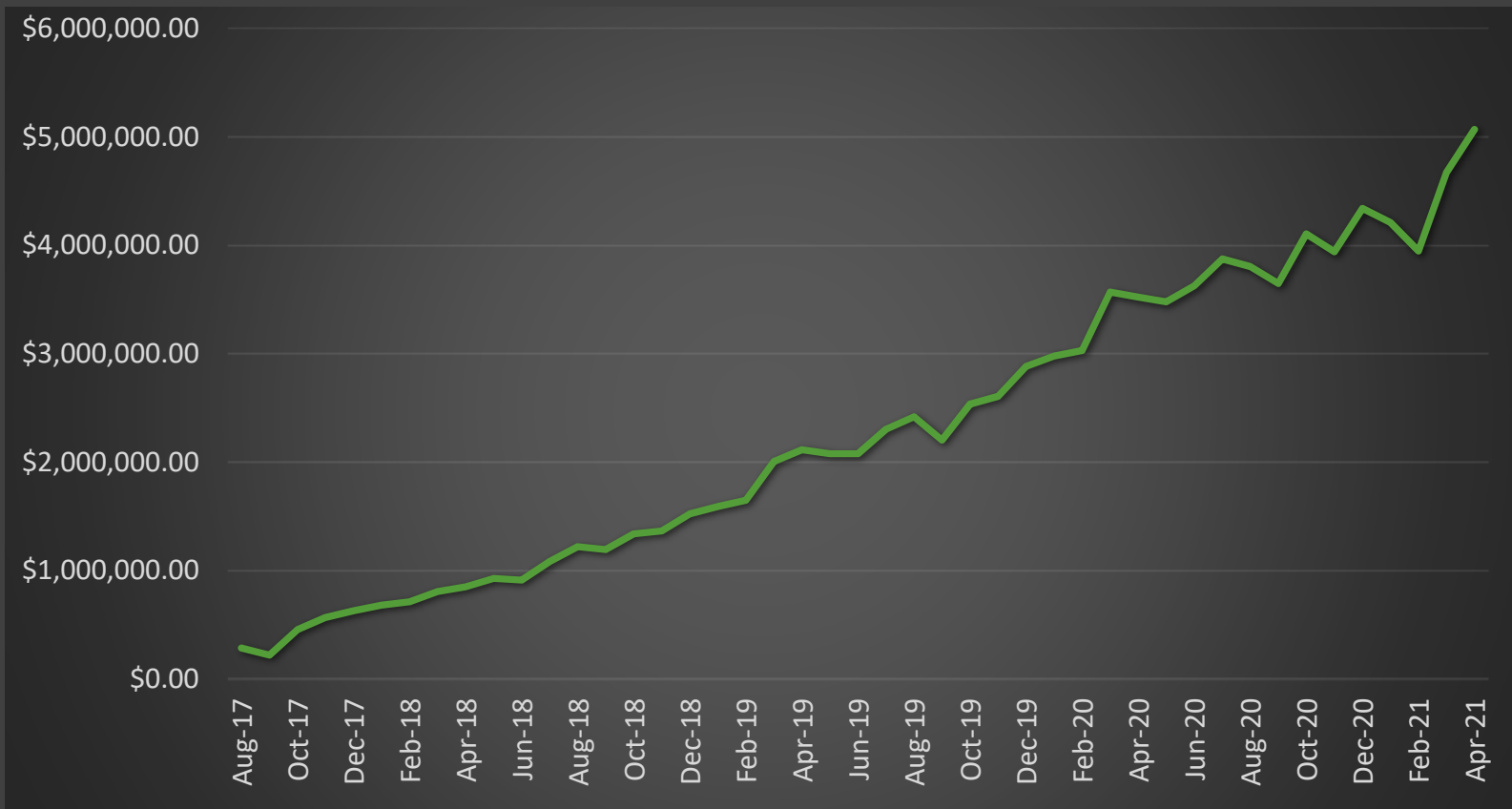






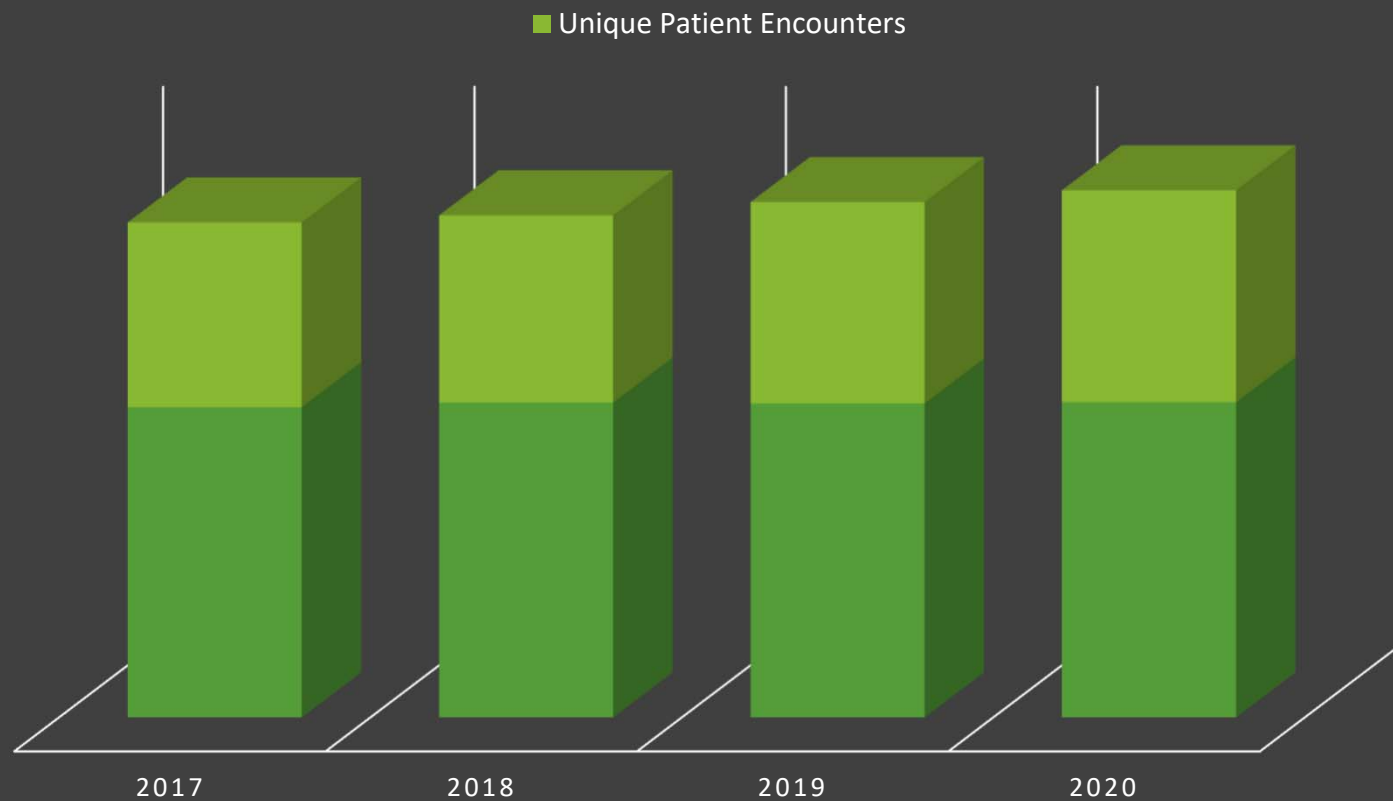
Dispensaries may dispense up to 4 ounces in a 15-day period & not to exceed 8 ounces in 30 days

# Statewide Sales by Month for August 2017 through April 2021



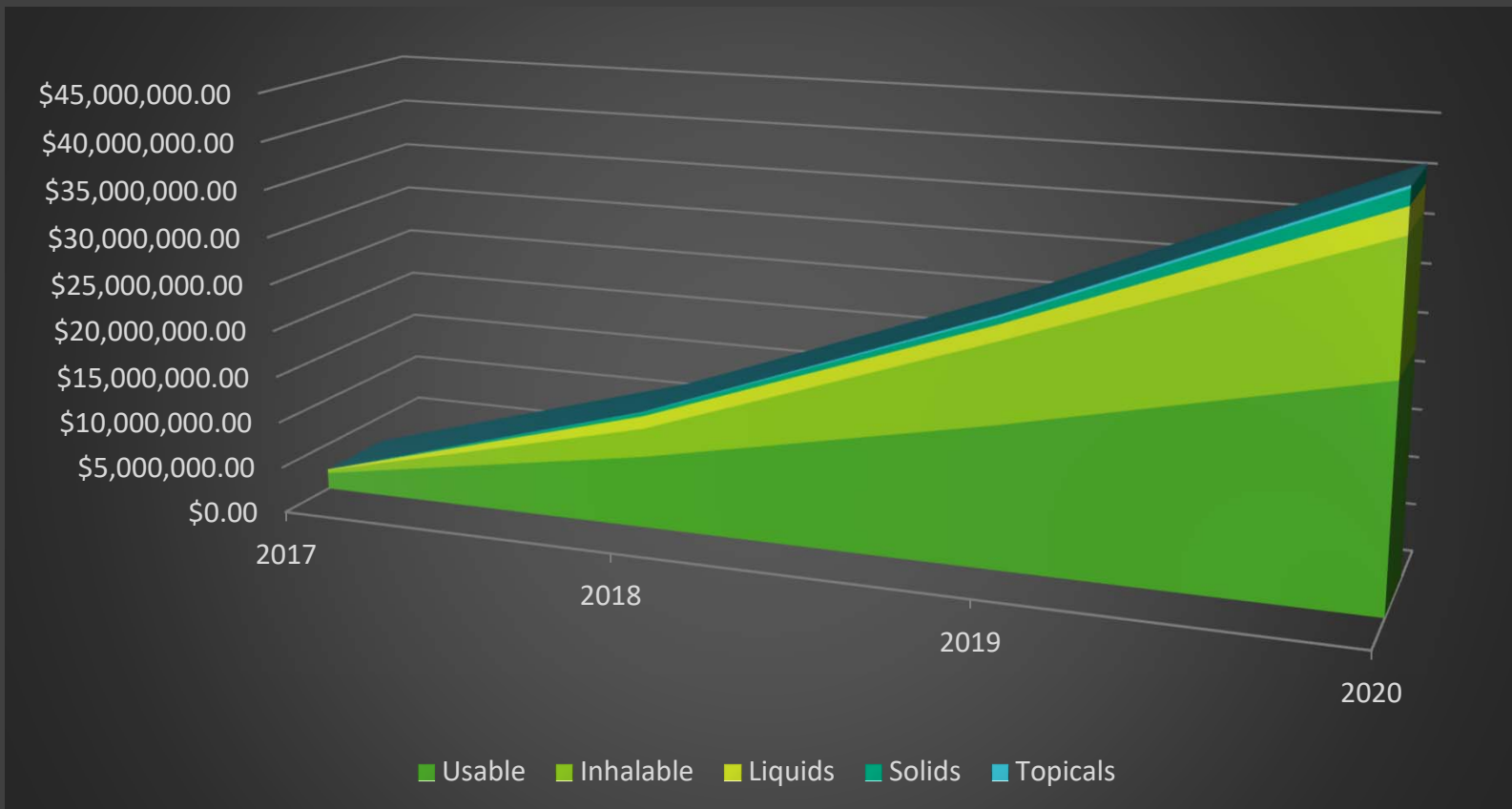
# Proportion of Patients Accessing Dispensaries

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# Statewide Sales by Product Type for 2017 through 2020





# Adult Use Data – CDC BRFSS

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Three cannabis-related questions will be included in the 2021 BRFSS:

**1. Current Use**

- During the past 30 days, on how many days did you use marijuana or cannabis?

**2. Mode of Use**

- During the past 30 days, which one of the following ways did you use marijuana the most often? Did you usually...

**3. Reason for Use**

- When you used marijuana or cannabis during the past 30 days, was it usually:

## Colorado Marijuana Use Patterns - Adults

### Monitoring Health Concerns Related to Marijuana in Colorado: 2020

Significant increase in past 30-day  
use/consumption among adults ages 18 years &  
older – 2014 (13.6%), 2017 (15.5%) 2019 (19.0%)

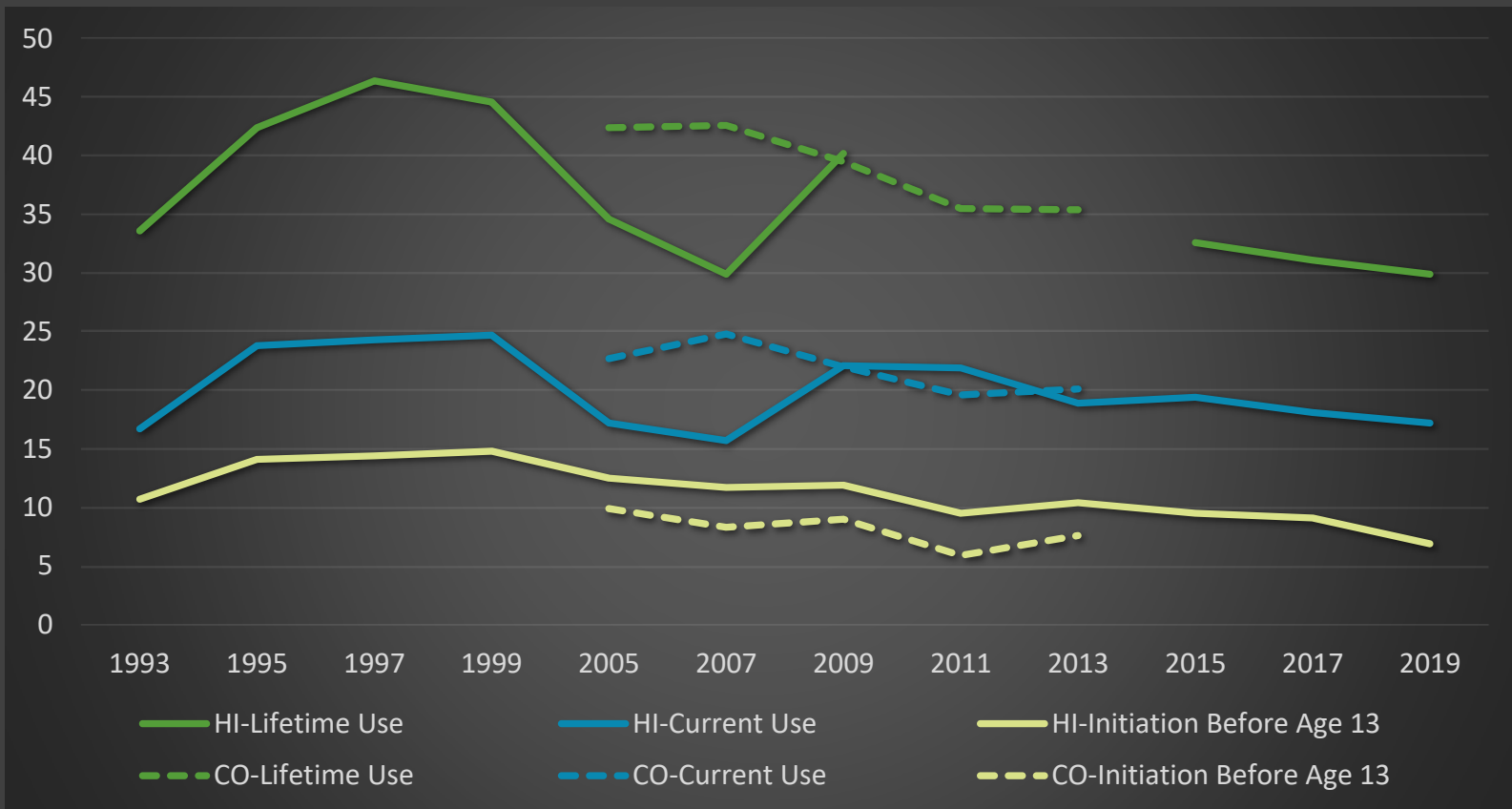
Significant increase in daily or near daily  
use/consumption among all adults – 2014 (6.0%),  
2017 (7.6%), 2019 (9.1%)

Significant increase in adults that think daily  
use/consumption has slight or no risk of harm –  
2017 (46.2%), 2019 (52.3%)

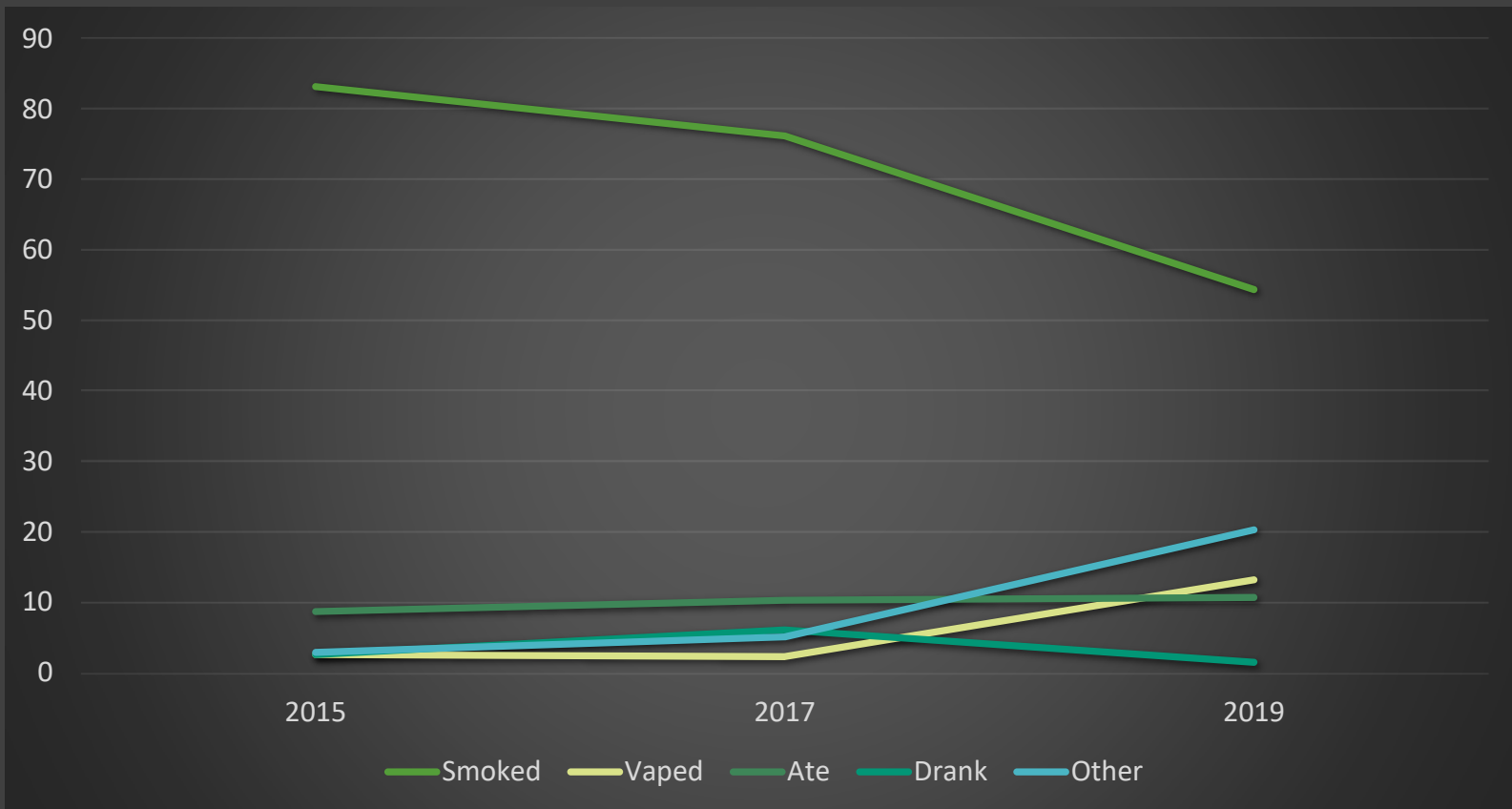
In 2019, nearly half (48.2%) of adult  
users/consumers used or consumed marijuana  
daily or near daily

January 2021, Colorado Department of Public Health and the Environment

# Marijuana Use – Hawaii & Colorado High School Youth Risk Behavior Survey



# Marijuana Mode of Use – Hawaii High School Youth Risk Behavior Survey



## Colorado Marijuana Use Patterns - Adolescents

### Monitoring Health Concerns Related to Marijuana in Colorado: 2020

Significant increase in driving after recently using among high school students that drove in the past 30 days – 2017 (9.0%), 2019 (11.2%)

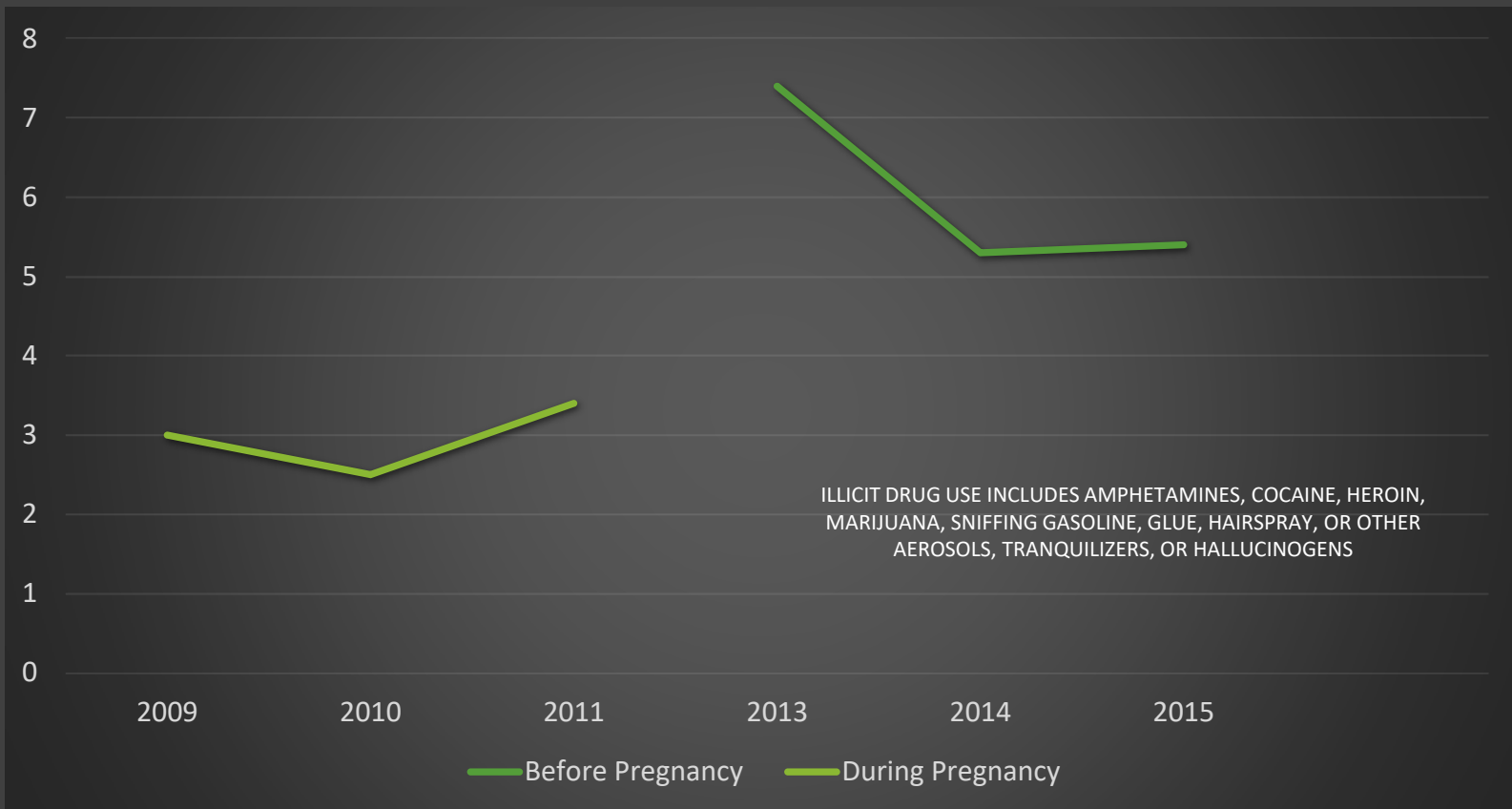
Significant increases in dabbing (2015-5.7%, 2017-6.9%, 2019-10.2%) & vaporizing (2015-4.4%, 2017-4.0%, 2019-6.8%) among high schoolers

Although smoking remained the most reported usual method of use in 2019 (55.9%), that is a significant decrease from 2017 (77.8%)

However, dabbing as the usual method of use among current high school users significantly increased from 2017 (7.6%) to 2019 (20.4%)

January 2021, Colorado Department of Public Health and the Environment

# Illicit Drug Use Before & During Pregnancy – HI PRAMS



## Poison Center Cannabis Exposure Call Trends

### **Trends and Characteristics of Manufactured Cannabis Product and Cannabis Plant Product Exposures Reported to US Poison Control Centers, 2017-2019**

- Total cannabis exposures increased, however, while quarterly plant-related exposure reports declined, manufactured product exposure reports increased overall and for each specific product
- Plant materials were the most common exposures (65.5%), followed by edibles (19.3%), concentrates (9.6%), vaporized liquids (3.8%), and other manufactured products
- Manufactured product exposures more often involved children <10 years (27.0%), compared with plant-based exposures (8.4%)
- Edible exposures had the greatest proportion of children (36.6%)

Dilley JA, Graves JM, Brooks-Russell A, Whitehill JM, Liebelt EL. JAMA Netw Open. 2021;4(5):e2110925. doi:10.1001/jamanetworkopen.2021.10925

# Colorado Scientific Literature Review

## Substantial Evidence

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### Adults

- THC can cause acute psychotic symptoms such as hallucinations, paranoia, delusional beliefs, & feeling emotionally unresponsive during intoxication. These symptoms are worse with higher doses of THC.

### Adolescents & Young Adults

- Daily or near daily use is associated with future psychotic disorders such as schizophrenia in adulthood
- Use is strongly associated with developing psychotic symptoms in adulthood, such as hallucinations, paranoia, & delusional beliefs
- Weekly or more frequent use is strongly associated with failure to graduate from high school
- Even less than weekly use is associated with future high-risk use of alcohol, tobacco, & other drugs



# Colorado Scientific Literature Review

## Moderate Evidence

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### **Adults**

- Use of marijuana with THC concentration >10% is associated with future psychotic disorders, such as schizophrenia

### **Adolescents & Young Adults**

- Use of higher THC concentration (>10% THC) is associated with continued use & development of future mental health symptoms & disorders
- Weekly or more frequent use is associated with not attaining a college degree
- Weekly, or more frequent, use is associated with impaired learning, memory, math & reading achievement, even 28 days after last use
- Use is associated with suicidal thoughts or attempting suicide

# APHA Policy Statement Updated January 19, 2021

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## **A Public Health Approach for Regulating Commercially Legalized Cannabis**

- Provide protection to children and youth and other vulnerable and marginalized populations through careful regulation
- Minimize harm to the public
- Prioritize equity, social justice and ameliorating harms caused to populations disproportionately impacted by prior drug policy approaches
- Monitor patterns of cannabis use and related public health and safety outcomes



Contact OMCCR:

Registry: [medicalcannabis@doh.hawaii.gov](mailto:medicalcannabis@doh.hawaii.gov)

Dispensary: [doh.medcannabis.dispensary@doh.hawaii.gov](mailto:doh.medcannabis.dispensary@doh.hawaii.gov)