

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF HEALTH
MEDICAL MARIJUANA ADVISORY BOARD MEETING

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BEFORE: DEBRA BOGEN, M.D., Chair
Laura Mentch, Director
Matthew Eaton, Member
Diana Briggs, Member
Christine Roussel, Pharm.D., Member
Royce Engler, Member
John Adams, Esq., Member
Geith Shahoud, M.D., Member
Bhavinini Patel, Member
Daniel Kambic, D.O., Member
Michael Lynch, M.D., Member

HEARING: Wednesday, March 20, 2024
10:35 a.m.

Reporter: Sophia Mahoney
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LOCATION: Capitol Media Center

State Capitol
501 North 3rd Street
Room 01 East Wing
Harrisburg, PA 17126

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Also Present:
Sandra Adams, Esquire
Charlina Daitouah, Esquire

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CHAIR: This morning I'm running between meetings. I'll officially call this meeting to order. This is the Medical Marijuana Advisory Board meeting being held at 10:30 a.m. on March 20th, 2024.

These meetings are broadcast live. First, I will take the roll. For your reference, you were provided with a Board Member list in your packet. When I read your name, please acknowledge that you are present for the record.

Colonel Paris. Christine Roussel.

MEMBER ROUSSEL: Present.

CHAIR: Chief Engler.

Chief, are you able to unmute and say you're here?

Matt Eaton.

MEMBER EATON: Present.

CHAIR: John Adams.

MEMBER ADAMS: Present.

CHAIR: Dr. Shahoud.

MEMBER SHAHOUD: Present.

CHAIR: Bhavinini Patel.

MEMBER PATEL: Present.

1 CHAIR: Dr. Kambic. Dr. Lynch.
2 Diana Briggs.

3 MEMBER BRIGGS: Present.

4 CHAIR: Has anyone else come back on
5 since I've done the roll?

6 Okay.

7 Chief Engler is online.

8 Excellent. Okay.

9 Marked him as present.

10 So Ms. Adams, can you please confirm
11 that we have a quorum for today's meeting?

12 ATTORNEY ADAMS: That is confirmed.

13 CHAIR: Great.

14 So before proceeding with the rest of
15 the full agenda, I just have a few announcements.

16 There are currently three vacancies on
17 our Medical Marijuana Advisory Board, as noted on the
18 membership list posted on the website and included in
19 your electronic Board packages.

20 Today we have Sandra, Sandy, Adams,
21 our Assistant Counsel, to assist with today's Board
22 meeting. We also have Charlina Daitouah, who is here
23 also serving as legal counsel to the Board.

24 All Board members are held - all Board
25 meetings are held on a Wednesday, in the same time

1 frame of about 10:30, when they're on time, sorry
2 about that, to 12:30 p.m., here in the Capitol Media
3 Center for the virtual option.

4 Board members, if any of the selected
5 dates don't work for your schedule, could you please
6 let Ms. Reddy know as soon as possible. We need to
7 have a quorum for these meetings. I do want to say
8 that on March 13th, 2024, from 12:00 to about 12:20,
9 a closed executive session was held with Counsel
10 Sandra Adams and Charlina Daitouah to provide Board
11 members with information regarding their rights under
12 the Medical Marijuana Act. The meeting was for
13 information purposes only and did not involve
14 deliberations.

15 A second informational session
16 regarding the Board member rights under the Act will
17 be scheduled with Counsel prior to the May 2024 Board
18 meeting.

19 Today's agenda reflects the items that
20 have been identified by the Board for discussion.

21 The next order of business is to
22 discuss the Minutes from the January 24th meeting.
23 Minutes from that January 24th meeting were sent to
24 you in advance for review. Comments have been
25 received and corrections are necessary to the January

1 24 Minutes.

2 Once corrections are completed, the
3 Minutes will be recirculated to the Board for review,
4 and they will be presented for the Board's approval
5 at the May 22, '24 meeting. Once approval - once
6 approved, then the Minute Meetings (sic) will be
7 posted to our website, the Medical Marijuana Advisory
8 Board website.

9 The next agenda item is an Office of
10 Medical Marijuana Program Update.

11 I'll turn these over to Laura Mentch,
12 Director of the Office of Medical Marijuana, to
13 provide her program update.

14 Thank you, Laura.

15 MS. MENTCH: The Office of Medical
16 Marijuana has recently been named - can I get closer?

17 Can you hear me? Good morning,
18 everyone. Thank you Dr. Bogen.

19 The Office of Medical Marijuana has
20 recently been named a bureau and is still getting
21 adjusted to being a bureau, so have some patience
22 with us as we change our forms and our signoffs from
23 office to bureau.

24 In the Governor's budget address, he
25 generously recommended our bureau have additional

1 complement be added to our staff, so we are
2 tentatively hopeful for that to be agreed upon and
3 planning to incorporate the bulk of that staff into
4 our facilities - Facility Compliance Division to
5 improve efficiency.

6 The Governor also mentioned adult-use
7 legislation in Pennsylvania. And to answer the
8 question that keeps being asked, the bureau's main
9 priority is to protect and preserve the Medical
10 Program. It is important to be able to continue to
11 offer medical patients the safe tested medicine in
12 dosage forms they are accustomed to. It is equally
13 as important to ensure access to medical
14 professionals on staff to discuss therapy and answer
15 any questions.

16 Next slide. We have been busy
17 planning for the Act 63 rollout. Final Act 63
18 application forms will be published no later than
19 4/12 of '24. Applications can be submitted between
20 5/12 and 6/11 by current Pennsylvania medical
21 marijuana permit holders who qualify as per Act 63.
22 Awards will be made in the fall of 2024.

23 A second window for Act 63 application
24 submittal is planned for early 2025 and every nine
25 months thereafter as necessary. Act 63 also allows

1 for additional ACRC applications and an updated
2 application form will be made available.

3 Next slide. The Bureau feels it's
4 relevant to reiterate the 13 counties deemed
5 underserved in the wake of Act 63, and that should be
6 the current slide.

7 Next slide. In keeping with our
8 promise for data transparency, we have added
9 information to the aggregate data web page. This
10 slide here shows the number of times or occurrences
11 that a serious medical condition was selected on
12 patient certification.

13 For awareness, practitioners are
14 required to choose one, but can select up to ten per
15 patient certification. I will also note that 2023
16 was the first time chronic hepatitis B was made
17 available as an option on the patient certification.

18 And thanks to this Board and Secretary
19 Bogen for effectuating that recommendation, it
20 appears that we've helped 80 individuals who are
21 suffering with that specific condition. The
22 aggregate data web page has been updated to include
23 this 2023 serious medical condition data.

24 Next slide. Now we'll talk about the
25 Medical Marijuana Assistance Program update. Phase

1 one of the Medical Marijuana Assistance Program
2 eliminated annual card fees for eligible participants
3 who attested to being registered in an existing
4 Commonwealth Financial Hardship Program. Since March
5 1st of 2022, MMAP Phase 1 has saved eligible patients
6 and caregivers more than \$11.5 million by eliminating
7 the annual fee and card cost for nearly 160,000
8 participants.

9 Phase 2 eliminated all background
10 checks for caregivers. And since March 1st of 2022,
11 MMAP Phase 2 saved nearly 6,600 new caregivers
12 approximately \$143,000 by eliminating the cost of
13 their background check.

14 Phase 3 distributes a \$50 benefit per
15 month per eligible patient. Phase 3 was launched in
16 the form of a pilot program in November of 2022 for
17 patients enrolled in PACE and PACENET. Since
18 November of 2022, MMAP Phase 3 has distributed almost
19 \$450,000 to patients participating in PACE to assist
20 with the costs of medication at the point of sale.

21 Next slide. Onto program metrics.

22 As of March 11th, 2024, the program
23 has 440,949 Active Patient Certifications, 9,203
24 Active Carded Caregivers, 1,929 Approved
25 Practitioners, 180 Operational Dispensaries, 33

1 Operational Grower Processors, and has distributed
2 \$470,087 in MMAP Phase 3 financial benefits.

3 Next slide. As you can see from the
4 dispensary sales by month slide, the first two months
5 of 2024 have been a significant increase over
6 previous years. This slide displays all of the
7 dispensary sales since January of 2020 through
8 February of 2024. There have been \$5.8 billion in
9 dispensary sales to date.

10 Next slide. This slide depicts the
11 dry leaf retail and wholesale prices through February
12 of 2024. And there's really nothing that much to say
13 about that slide.

14 That really concludes the program's
15 update for today.

16 CHAIR: Thank you, Laura.

17 Are there any questions from the Board
18 for Laura?

19 MEMBER ROUSSEL: This is Christine
20 Roussel. I just want to compliment how much the
21 medical marijuana new bureau is doing. It's exciting
22 that there's an investment increase in stability in
23 my division, and I'm most thoughtful and appreciative
24 of the work you guys are doing for health equity,
25 saving costs for the patients, as well as enabling

1 access. Just a compliment.

2 CHAIR: Thank you. Thanks,
3 Christine. Thank you so much.

4 All right. Hearing no other
5 questions, we'll move to old business. As discussed
6 in the previous meetings, each subcommittee Chair
7 will provide an update at each Board meeting
8 regarding the activities since the previous meeting.

9 So if it's okay, we will start with
10 the Medical Review Subcommittee. In July of 2022,
11 the Board approved the policy to establish the
12 process for accepting recommendations from the
13 Academic Clinical Research Centers, they're also
14 known as ACRCs, for qualifying serious medical
15 condition, to be added for Chapter 20 research
16 purposes only. This policy is posted on the Medical
17 Marijuana Advisory Board website.

18 We received two Serious Medical
19 Conditions for Chapter 20 Research Applications from
20 Penn State's College of Medicine. One is regarding
21 traumatic brain injury with chronic symptoms, and the
22 second is regarding Type 2 diabetes.

23 That being said, I'll turn things over
24 to the Medical Review Subcommittee for discussion on
25 serious medical conditions to be added for Chapter 20

1 Research Applications.

2 Dr. Shahoud, thanks for writing this
3 part.

4 MEMBER SHAHOUD: Thank you. The
5 Medical Review Subcommittee was in the receipt of
6 Serious Medical Condition Chapter 20 Research
7 Application from Penn State College of Pennsylvania
8 for moderately severe traumatic brain injury with
9 chronic symptoms last year.

10 This application is to conduct
11 clinical and preclinical studies to document the
12 potential value of the category of traumatic brain
13 injury. This application was approved at the January
14 2024 meeting.

15 Next step is to submit a formal draft
16 report stating the justification. We plan to submit
17 a final report to the Board and the Secretary for
18 approval at the May 22nd meeting, as required.

19 The Medical Review Subcommittee is
20 also in a receipt of Chapter 20 application for
21 Diabetes Type 2 from Penn State College of Medicine.
22 And this application is currently under review. We
23 will make a recommendation by the next meeting.

24 CHAIR: Thank you. Thanks for that
25 update, Dr. Shahoud

1 As Dr. Shahoud just noted, a written
2 report is the next step in the approval process for
3 the Chapter 20 Research Applications. This
4 requirement is set forth by the policy and requires
5 that the Medical Review Subcommittee provide a
6 written report containing its findings and
7 recommendations that the application be approved for
8 research purposes only.

9 If the report is approved, then the
10 report is distributed to the Governor, the Senate,
11 the House of Representatives, and the Secretary of
12 Health and will be public record under the
13 Right-to-Know Law. Approval of the report does not
14 mean that the condition is automatically added as a
15 serious medical condition. The Board's
16 recommendation will be taken under review and
17 consideration and may or may not be effectuated with
18 reason.

19 Next. Oh, yes, thank you.

20 We did have two additional Board
21 members join the call.

22 Dr. Kambic is present and Dr. Lynch is
23 present.

24 Is that correct? Can you confirm
25 you're both here?

1 MEMBER KAMBIC: Dr. Kambic is here.

2 MEMBER LYNCH: Yes, Dr. Lynch is here.

3 CHAIR: Wonderful. Thank you. We can
4 correct the attendance and the roll call. Thank you.

5 All right.

6 Next is the Patient and Caregiver
7 Subcommittee, chaired by Diana Briggs.

8 MEMBER BRIGGS: Good morning. The
9 Patient Caregiver Subcommittee met last month. We
10 were joined by our fellow subcommittee Chairs,
11 Christine Roussel and Bhavinini Patel.

12 We continued discussion on extraction
13 and decontamination methods used in other states'
14 Medical Marijuana Programs. I want to thank the
15 Bronze teams - team and the Therapy team for sharing
16 your knowledge and expertise with us all, and we look
17 forward to continuing that discussion in the coming
18 months.

19 The subcommittee continues to be
20 excited about the continued growth of our program and
21 thrilled with MMAP and all of the assistance to our
22 patient caregiver community. And we continue to be
23 involved and hope that 2024 is the best year yet for
24 this program.

25 CHAIR: Thank you so much. The next

1 is the Regulatory Subcommittee, chaired by Dr.
2 Christine herself.

3 MEMBER ROUSSEL: Good morning. Hi.

4 The Regulatory Subcommittee has been
5 working on Medical Marijuana Regulations related to
6 healthcare facilities and institutions. We had met
7 once in January. We had a second meeting February
8 20th with stakeholders from pharmacists and health
9 system nurses and health systems nursing homes and
10 then school nurses.

11 We worked with the stakeholders to do
12 two separate surveys, one of school nurses and one of
13 hospital pharmacists. We'll be meeting again in
14 April to review the feedback that we got from the
15 surveys and work on some suggested language to help
16 enable best care for our patients who need medical
17 marijuana products while in healthcare facilities.

18 So we hope to have another update in
19 May. And I'm grateful for everyone who's involved.
20 And while we haven't set the April date, if anyone is
21 willing, they're welcome to reach out to the Board if
22 they can come participate in this.

23 That is all the update at this time
24 for the Regulatory Subcommittee.

25 CHAIR: Great. Thank you so much.

1 And our last subcommittee report is
2 from the Medical Research Subcommittee, chaired by
3 Bhavinini Patel, to also include discussions with the
4 Organic Remedies presentation regarding the findings
5 of the research initiative.

6 Bhavinini.

7 MEMBER PATEL: Yes. Good morning.
8 Thank you. So there's been quite a few different
9 discussions that have happened within the
10 subcommittee, as well as at our last Board meeting,
11 there was an opportunity to ask questions. There was
12 presentations that were made to sort of continue the
13 dialogue.

14 And so today, you know, based on
15 discussions that have happened with the subcommittee,
16 we've recognized that the subcommittee is not
17 unanimous in its recommendation. It moves that the
18 Board members who are in favor of approving Organic
19 Remedies solvent-based extraction method and process
20 on microbial contamination vote aye, and those who
21 are not in favor vote nay.

22 And so we would like to bring this to
23 a vote.

24 CHAIR: Thanks, Bhavinini.

25 Before the Board member discussion,

1 Board Counsel would like to make a few comments
2 regarding the protocol.

3 Sure. Just to explain the process.

4 ATTORNEY ADAMS: It'll be similar to
5 other motions and votes that occur before the Board,
6 but just so everybody's clear, today would be the
7 first step in the process, which is to move the vote
8 forward.

9 If the Board votes in favor of
10 approving the extraction method, the next step will
11 be for the subcommittee to prepare a written report
12 with its recommendations and findings that would be
13 presented to the Board for consideration and another
14 vote to approve the recommendations. At which point
15 the report would be circulated to the Governor, the
16 Senate and the House of Representatives.

17 It would also be presented to the
18 Secretary for her consideration. After that she
19 would have a 12-month period to effectuate the report
20 or not. And if she did effectuate the report, that
21 wouldn't be the last step for Organic Remedies in the
22 process.

23 In this instance, if effectuated,
24 Organic Remedies would still have to complete an
25 application with the Department changing - requesting

1 a change to its extraction process. And it would
2 also have to undergo a site and facility inspection
3 by the Department before it would be permitted to
4 change that process under the Act.

5 So with that said, I'll turn it back
6 over to you if you want to have further discussions.

7 CHAIR: Great.

8 So are there questions, discussion by
9 the Board on this topic, for the subcommittee
10 particularly, or for general discussion?

11 ATTORNEY ADAMS: I think it might be
12 helpful for the Board to have some understanding
13 where the Board members stand or the subcommittee
14 stands in their positions. I know you said it was
15 not unanimous in terms of what the recommendation
16 would be. But I don't think that necessarily informs
17 the rest of the Board members as to whether some
18 people are in favor or not in favor or why those
19 positions are held. So maybe a conversation or some
20 background information as to where people are falling
21 would be useful.

22 CHAIR: Bhavini, are you able to
23 provide any more information about some of the issues
24 that were discussed and challenges where the Board
25 stands?

1 MEMBER PATEL: Yeah, absolutely. So
2 we actually had several different discussions, you
3 know, partially some of those did take place in the
4 Board meeting here publicly, back and forth.

5 I do intend on voting yes. I felt
6 like that there was enough information that was
7 shared that provided some context around the
8 extraction method and some of the considerations that
9 would take place in terms of safety.

10 CHAIR: However, I know that Diana has
11 also been an excellent sort of voice and convener of
12 dialogue. So Diana, I don't know if you have
13 thoughts.

14 And I know that Christine also
15 mentioned some of her concerns around this. So I
16 think that hearing from both of them might be a good
17 way to sort of continue this dialogue, if the Board
18 has additional ideas or would like to hear more.

19 MEMBER BRIGGS: Absolutely. I think,
20 you know, I held a couple of different subcommittee
21 meetings trying to educate the patient caregivers on
22 what this extraction method means for our program. I
23 also would be a yes to move this to the full Board
24 for a vote.

25 I'm certainly not an expert, but I've

1 talked to enough experts, and I've certainly tried to
2 learn what is happening in other states' programs and
3 understand we would not be inventing the wheel here
4 in Pennsylvania. So I think that for all intents and
5 purposes, to move our program forward, I think that
6 this is something that should be considered. And I
7 agree with the vote happening today.

8 MEMBER ROUSSEL: And this is Christine
9 Roussel. I did miss the last subcommittee meeting.
10 That was last week. I was out of the country. But I
11 think we worked through a lot of the concerns, and I
12 - you know, I don't disagree. I think Organic
13 Remedies, you know, extraction method using
14 hydrocarbons does effectively decontaminate products
15 from microbial and fungal contaminations. So it's
16 just a matter of finalizing it.

17 CHAIR: Are there other voices that
18 would like to share from the subcommittee about their
19 thinking about this process and this decision before
20 the vote?

21 Any other questions from any of the
22 Board members?

23 Okay. Bhavani, would you please
24 restate the motion specifically before the Board?

25 MEMBER PATEL: Yes. It moves that the

1 Board members who are in favor of approving Organic
2 Remedies solvent-based extraction method, and process
3 on microbial contamination vote aye. And those who
4 are not in favor vote nay.

5 CHAIR: Do I have a second for that
6 motion?

7 MEMBER BRIGGS: I second.

8 CHAIR: I think that was Diana Briggs.
9 Is that right?

10 MEMBER BRIGGS: Yes.

11 CHAIR: Okay. All right. I will take
12 the roll -.

13 Does anyone have any - object if I
14 take a roll call?

15 Okay. Colonel Paris is not on.
16 Correct?

17 All right. Christine Roussel.

18 MEMBER ROUSSEL: Aye.

19 CHAIR: Chief Engler.

20 MEMBER ENGLER: Aye.

21 CHAIR: Matt Eaton.

22 MEMBER EATON: Aye.

23 CHAIR: John Adams.

24 MEMBER ADAMS: Aye.

25 CHAIR: Dr. Shahoud.

1 MEMBER SHAHOUD: Aye.

2 CHAIR: Bhavinini Patel.

3 MEMBER PATEL: Aye.

4 CHAIR: Dr. Kambic.

5 MEMBER KAMBIC: Aye.

6 CHAIR: Dr. Lynch.

7 MEMBER LYNCH: Aye.

8 CHAIR: Diana Briggs.

9 MEMBER BRIGGS: Aye.

10 CHAIR: And I will - and I abstain.

11 So the motion has passed.

12 According to the report policy, the
13 Medical Research Subcommittee must submit a written
14 report with its recommendations and findings. And if
15 approved, then the report is distributed to the
16 Governor, the Senate, the House of Representatives,
17 and the Secretary of Health. Then this report will
18 be public under the Right-to-Know Law.

19 For clarification purposes, if a
20 report is approved, it does not mean that automatic
21 changes are made to the program by a document report.
22 The Department may or may not effectuate
23 recommendations with reason.

24 I want to thank the subcommittee and
25 the subcommittee Chairs for their work and their

1 updates.

2 Next is new business. Thank you to
3 the subcommittees and Chairs today for their work and
4 updates.

5 Next is - any additional questions?
6 Any other questions or items for discussion? Quiet
7 group today.

8 All right. Hearing no more
9 discussion, any more questions, I want to thank
10 everyone for your participation and for joining the
11 Board meeting today. I look forward to seeing you
12 all at our next scheduled meeting, May 22nd.

13 We have the calendar date on the
14 slide. There we go. Please check your calendars and
15 let Ms. Reddy know if there are any conflicts.

16 May I have a motion to adjourn the
17 meeting?

18 MEMBER EATON: Matthew Eaton, so move.

19 CHAIR: Second, please.

20 MEMBER KAMBIC: Dr. Kambic, second.

21 CHAIR: All in favor, say aye.

22 AYES RESPOND

23 CHAIR: Anyone opposed? Thank you.

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25 MEETING CONCLUDED AT 11:01 A.M.

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CERTIFICATE

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I hereby certify that the foregoing proceedings,
Tammy Morrison was reported by me on March 20, 2024
and that I, Sophia Mahoney, read this transcript, and
that I attest that this transcript is a true and
accurate record of the proceeding.

Date the 9th day of April, 2024



Sophia Mahoney,
Court Reporter