

Testimony as delivered on January 4, 2022, to Connecticut's Social Equity Council

Good morning, Council members, and thank you for the opportunity to speak.

In November, Michigan issued a massive recall of \$230 million of cannabis flower products at 400 dispensaries. Michigan allows yeast and mold of up to 10,000 CFU/g for medical cannabis. This was the same standard used by Connecticut prior to August 2020 when DCP approved an increased limit of multiple orders of magnitude through private emails without notifying patients or the public.

Those who attended the October 15th public hearing of the Board of Physicians may recall one of the board members boasting how "other states are jealous" of Connecticut's medical cannabis program. That hubris was given a sharp rebuke on the national stage a few weeks later. Connecticut's cannabis testing standards became a national laughingstock in December when the Chicago Sun-Times published multiple articles referencing DCP's secretive changes first reported by Ginny Monk for Hearst Connecticut Media Group. The change didn't come to light until there were public records requests under the Freedom of Information Act as well as a complaint. When the lead microbiologist of MCR Labs in Massachusetts heard about the change, his response was, and I quote, "I wouldn't be surprised if visibly moldy product begins clearing its way to shelves." It then took public shaming and a sharp decrease in sales of medical cannabis to force DCP into corrective action.

From the patient perspective, DCP has lost whatever trust might have remained. If a non-cannabis pharmaceutical product saw double-digit percentage variance in potency from one batch to another, there would be a federal investigation and heads would roll. But this is the norm for our supposedly "authentic medical" program. The director of one of our two cannabis testing labs lives in California, with no permanent residential address in our state. The other lab's director instructs concerned patients to "contact the dispensary," which sets off a well-worn chain of buck-passing from dispensary to licensed producer to DCP, where complaints ultimately go to die. It's no secret why there are still only four licensed producers of cannabis in Connecticut, or why patients are not allowed to inspect medication for safety prior to purchase. This program is textbook regulatory capture, structured as an insular cartel.

I say all that to say this. All four of our licensed producers are now owned and controlled by out-of-state corporations. As Connecticut transitions to a hybrid medical and recreational market, the barriers to entry for micro-cultivators are already prohibitively high. Add the cost of lab testing on top of that, and it's a serious equity problem. Corporate multistate operators currently salivating over anticipated windfall profits should be subsidizing testing costs for the micro-cultivators. This is how you rebuild trust after endangering patients with inadequate testing, through good-faith gestures that are responsible, responsive, and just.

Finally, we need an ombudsman-led Patient Advocacy Council in the medical program. Though DCP finally seeking public comment on revised testing standards is a positive step, the fox still cannot be trusted to regulate the hen house. Thank you.