

KANSAS CANNABIS COALITION



Date of testimony: March 16

Testimony: **PROPOSER TESTIMONY for SB 560, Fed and State Affairs** – Establishing a medical marijuana bill in Kansas

Delivery: **ORAL VIRTUAL TESTIMONY**

Name: **Margaret Sparrow**, Government Affairs Committee Chair for the Kansas Cannabis Coalition

Email: [m.m.henry96@gmail.com](mailto:m.m.henry96@gmail.com)

Chairmen Olsen and members of the Fed and State Affairs Committee

Thank you for the opportunity to present testimony today. My name is Margaret Sparrow, and I am the Government Affairs Committee Chair for the Kansas Cannabis Coalition. The Coalition exists as a dedicated independent group of organizations and individuals working in an advisory role towards strategic, long-term campaigns for accelerating change in cannabis reform in Kansas. Today I am testifying from a patient's perspective on cannabis.

This bill encompasses most all of the medical disorders that we would like to see in this bill. Compared to some of the language in past bills, we are pleased with the wide-ranging medical conditions listed that will have access to this life-changing plant. This will ensure that all patients are granted the compassion they deserve as they move through life with these debilitating conditions, whether the condition be physical, mental, or both. We see the goal of this bill as giving access to a broad spectrum of patients, and this language guarantees that those who need it will have access.

The biggest issue that could limit or hinder this access for patients, however, may be the fines and fees that cultivators and dispensers have to pay to establish their business. The fines and fees that are listed in this bill are too high for both cultivators, distributors, and indirectly, the patients this bill will serve. I will leave the details of the full effects of the fees on businesses to someone who has more knowledge of the inner workings of these businesses, but we see these high fees being transferred onto the end-cost of the product for patients. When businesses struggle to make a profit, their next move to alleviate their losses is to distribute the cost onto the consumers. Patients are likely to see increased costs for the products that they need, which will drive them to find cheaper alternatives either across state lines<sup>1</sup> or in the black market<sup>2</sup>. The reason for creating this program is to direct the newfound taxes into the state coffers and lower the opportunity for illegal drug distributors to find a market within our state. As such, these high costs for patients will deter the progress we are looking to make with this program, and they should be lowered to allow for a full transition into a legal, profitable industry.

---

<sup>1</sup> <https://www.arkansasonline.com/news/2021/mar/15/states-medical-pot-pricing-out-patients/>

<sup>2</sup> <https://www.nbcnews.com/news/us-news/ridiculous-price-medical-marijuana-leaves-patients-scrambling-n1274085>

Another issue of contention is the medical prescription tracking system through KTRACS. As the bill is written now, regular, hourly employees with no medical background will be able to access patient records through KTRACS. This could cause serious HIPPA violations for the doctors prescribing the drug and have no place in the dispensary system. While we believe KTRACS is overall beneficial for the tracking of cannabis recommendations from physicians, they should be strictly limited to only doctors, nurses, or other prescribing physicians to give the best recommendations for the patient while respecting their privacy.

Finally, we recommend the list of cannabis products that are able to be sold by dispensaries to include topical application. These topicals are typically chosen by patients who are looking to receive the benefits of the pain and inflammation relief without the psychoactive effects<sup>3</sup>. They are extremely beneficial for those with chronic pain, and we ask to have the language amended to add this product.

Overall, we think this bill is a great start for a medical program here in Kansas. I have added some additional resources for you to view if you have any questions. Thank you for the opportunity to present testimony today.

### **Additional Resources:**

Vrbin, *State's medical pot pricing out patients*, Arkansas Democrat Gazette.

<https://www.arkansasonline.com/news/2021/mar/15/states-medical-pot-pricing-out-patients/>

Enright, Chiwya, and Muccari, “Ridiculous” price of medical marijuana leaves patients scrambling, NBC news. <https://www.nbcnews.com/news/us-news/ridiculous-price-medical-marijuana-leaves-patients-scrambling-n1274085>

Rahn, *What are cannabis topicals and how do they work?* Leafly.

<https://www.leafly.com/news/cannabis-101/what-are-cannabis-topicals>

---

<sup>3</sup> <https://www.leafly.com/news/cannabis-101/what-are-cannabis-topicals>