
FISCAL UPDATE Article

Fiscal Services Division

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MEDICAL CANNABIDIOL ADVISORY BOARD — NOVEMBER 2018

Meeting. The Medical Cannabidiol Advisory Board met November 2, 2018, in Ankeny.

Petitions to Add Qualifying Conditions. The Board opened the meeting by receiving public comment related to the petitions for adding qualifying conditions covered by the Medical Cannabidiol Act (Iowa Code chapter [124E](#)). There were five petitions before the Board that included post-traumatic stress disorder (PTSD), bipolar disorder, autism, attention deficit hyperactivity disorder (ADHD), and ganglioglioma. The PTSD and bipolar disorder petitions had been deferred from the August 2018 Board meeting. Board rules require that it take action on a petition within six months of receipt. The petitions should be posted on the Board's website soon.

Much of the discussion for all of the petitions before the Board revolved around evidence-based research versus compassionate treatment. The Board took action on all petitions, with the following results:

- For PTSD, after a lengthy discussion, the motion was made to vote to approve the condition. The motion to approve resulted in a 4-4 vote (the Gastroenterologist position on the Board is still vacant). Since the Board neither approved nor denied the petition, the condition could be revisited in the future.
- For autism, after a lengthy discussion, the motion before the Board was to add "severe intractable pediatric autism with self injurious or aggressive behavior to the qualifying conditions." The motion passed 7-1. The next step for this recommendation is to proceed to the Board of Medicine.
- For bipolar disorder, the motion to deny passed 8-0.
- For ADHD, the motion to deny passed 8-0.
- For ganglioglioma, since it is a benign tumor, it does not qualify under the cancer provision. The Board denied this petition 8-0 with the interpretation that the symptoms of the disease would fit within the current definitions of intractable pain which is already covered by current law.

Annual Report Creation. Discussion primarily focused on enhancing the wording around policy recommendations and rationale from last year's report. There was also discussion regarding adding procedures for non-home settings such as long-term care facilities, schools, and hospitals. Adding language supporting further research was also discussed, since many of the votes cast against adding qualifying conditions are generally sourced from a lack of evidence-based research. A subcommittee was created to finalize the annual report by the submission date.

Form Recommendation. The Board revisited the "inhaled forms" language that was previously not approved by the Board of Medicine. The discussion noted the information learned over the past year, the palliative care concerns regarding the effectiveness of an inhalable delivery, and the change of membership in the Board of Medicine. The Board proposed adding inhaled forms limited to nebulizable or vaporizable. The motion to approve passed 6-2.

THC Level Recommendation. The Board discussed the current 3.0% cap on THC and how the Department of Public Health (DPH) has interpreted that law. The Board voted 8-0 to support maintaining the current THC cap.

Manufacturer and Dispensary Updates. Representatives from MedPharm Iowa LLC presented an update on its buildings, education, employment, and products. The manufacturing building has been completed and held a grand opening. Furnishing is nearly complete for the dispensaries in Windsor

Heights and Sioux City. Eleven education sessions have taken place across the State with over 200 attendees. The manufacturing facility is fully staffed and offers are near for staffing the dispensaries. MedPharm will be selling its product under the brand name "Aliviar," and there will be four ratios listed in CBD:THC format (20:1, 2:1, 1:1, and 1:20). There will also be guideline recommendations for the qualifying conditions and ratios. There will be a variety of formulations with different dosage amounts. The preliminary price range was from \$10 to \$130 across the options for a typical 30-day supply. MedPharm is trying to standardize prices for dosages across the options so a patient's choice would not be limited by price.

Representatives from Iowa Relief LLC, the second manufacturer selected by the DPH that will be located in Cedar Rapids, gave a corporate introduction presentation to the Board. The firm is a subsidiary of Acreage Holdings (previously known as High Street Capital Partners) and is engaged in cannabis production in some capacity in 17 states. The manufacturer currently plans to have products available to bring to market by the end of June 2019.

A representative from Have a Heart, the dispensaries located in Council Bluffs and Davenport, stated that the dispensaries are on target to open their doors on December 1, 2019. Offers have been extended to staff the stores, and other interviews are being finalized for the remaining positions. Have a Heart's largest remaining challenge at this point is integrating the State seed-to-sale tracking system with its chosen point-of-sale system.

Representatives from the Iowa Cannabis Company, the dispensary in Waterloo, were not present.

Department Updates. The DPH reported on the progress of adding ulcerative colitis to the list of qualifying conditions. Administrative rules were approved by the Board of Medicine in September. The Department has also been doing provider education through offering continuing medical education credits. Inspections and product testing have been taking place at MedPharm. Dispensary inspections and trainings will be taking place next week. The seed-to-sale tracking application continues to be worked on in order to be operational by December 1.

Applications for registration cards are increasing as the date of availability draws near. A new online registration card portal has gone live with successful use by applicants. Due to a technical issue with some cards, the Department of Transportation (DOT) will be issuing new cards to some cardholders. As of this meeting, approximately 470 cards have been issued. Additionally, there are 360 applications that have been approved, but the patients or caregivers have not gone to a DOT location to have a card issued. The DPH stated concern that approved applicants will show up at a dispensary with only the department approval letter and not a registration card. However, the lag in card issuance could also be due to the fact that cards expire one year from their date of issuance, and since there are no products available to purchase yet, there is no reason to have a card issued. Waiting until November to obtain a card would maximize the value of the application fee to the consumer.

The DPH reported that they added to the patient certification form a voluntary checkbox for certifying physicians to opt-in to being put on an internal list to assist patients who are having trouble finding a certifying physician. As of this meeting, about 290 physicians had certified patients in Iowa. The Board was pleased that the list was not posted publicly. The Board understood the public health concerns of connecting patients to providers, but was highly concerned with this practice and drew comparisons to "doctor shopping" for opioid prescriptions. The DPH remarked on the number of doctors currently certifying conditions, and the difficulty in trying to connect patients in rural areas where there are few providers. The DPH also stated it will be able to analyze data on the number of doctors certifying conditions for patients and look for abnormalities, and the DPH is willing to re-evaluate this practice moving forward.

Next Meeting. The next meeting is scheduled for February 1, 2019, in Ankeny. Additional information can be found on the Medical Cannabidiol Advisory Board's [webpage](#).

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