

Committee Report

CONSENT CALENDAR

March 1, 2021

HOUSE OF REPRESENTATIVES

REPORT OF COMMITTEE

**The Committee on Health, Human Services and Elderly
Affairs to which was referred HB 599-FN,**

**AN ACT relative to the therapeutic cannabis medical
oversight board. Having considered the same, report
the same with the following resolution: RESOLVED,
that it is INEXPEDIENT TO LEGISLATE.**

Rep. Dennis Acton

FOR THE COMMITTEE

COMMITTEE REPORT

Committee:	Health, Human Services and Elderly Affairs
Bill Number:	HB 599-FN
Title:	relative to the therapeutic cannabis medical oversight board.
Date:	March 1, 2021
Consent Calendar:	CONSENT
Recommendation:	INEXPEDIENT TO LEGISLATE

STATEMENT OF INTENT

This bill is a citizen-requested bill that adds new requirements on the medical director of the Department of Health and Human Services (DHHS) to conduct a review of qualifying medical conditions under the therapeutic cannabis law. The bill also requires members of the Therapeutic Cannabis Medical Oversight Board (TCMOB) to disclose certain conflicts of interest before participating in matters in which such conflicts of interest exist. The committee heard testimony from the chairman of the TCMOB who explained how this bill would create redundant and unnecessary changes to the current rules. A representative of DHHS also testified and informed the committee that the department has taken a stance against this bill for these same reasons. Having heard no testimony in favor of this bill, the committee recommends this bill Inexpedient to Legislate.

Vote 20-0.

Rep. Dennis Acton
FOR THE COMMITTEE

Original: House Clerk
Cc: Committee Bill File

CONSENT CALENDAR

Health, Human Services and Elderly Affairs

HB 599-FN, relative to the therapeutic cannabis medical oversight board. **INEXPEDIENT TO LEGISLATE.**

Rep. Dennis Acton for Health, Human Services and Elderly Affairs. This bill is a citizen-requested bill that adds new requirements on the medical director of the Department of Health and Human Services (DHHS) to conduct a review of qualifying medical conditions under the therapeutic cannabis law. The bill also requires members of the Therapeutic Cannabis Medical Oversight Board (TCMOB) to disclose certain conflicts of interest before participating in matters in which such conflicts of interest exist. The committee heard testimony from the chairman of the TCMOB who explained how this bill would create redundant and unnecessary changes to the current rules. A representative of DHHS also testified and informed the committee that the department has taken a stance against this bill for these same reasons. Having heard no testimony in favor of this bill, the committee recommends this bill Inexpedient to Legislate. **Vote 20-0.**

Original: House Clerk

Cc: Committee Bill File

Voting Sheets

STATE OF NEW HAMPSHIRE
OFFICE OF THE HOUSE CLERK



1/22/2021 10:06:45 AM
Roll Call Committee Registers
Report

2021 SESSION

Health, Human Services and Elderly Affairs

Bill #: HB 599-FN Motion: ITL AM #: _____ Exec Session Date: 2/23/21

<u>Members</u>	<u>YEAS</u>	<u>Nays</u>	<u>NV</u>
Pearson, Mark A. Chairman	20		
Marsh, William M. Vice Chairman	1		
McMahon, Charles E.	2		
Nelson, Bill G.	3		
Acton, Dennis F.	4		
Gay, Betty I.	5		
Cushman, Leah P.	6		
Folsom, Beth A. Clerk	7		
Kelsey, Niki	8		
King, Bill C.	9		
Kofalt, Jim	10		
Weber, Lucy M.	11		
MacKay, James R.	12		
Snow, Kendall A.	13		
Knirk, Jerry L.	14		
Salloway, Jeffrey C.			1
Cannon, Gerri D.	15		
Nutter-Upham, Frances E.	16		
Schapiro, Joe	17		
Woods, Gary L.	18		

STATE OF NEW HAMPSHIRE
OFFICE OF THE HOUSE CLERK



1/22/2021 10:06:45 AM
Roll Call Committee Registers
Report

2021 SESSION

Health, Human Services and Elderly Affairs

Bill #: HB 599-FN Motion: ITL AM #: _____ Exec Session Date: 2/23/21

Merchant, Gary		19		
TOTAL VOTE:		20	0	1

Hearing Minutes

HOUSE COMMITTEE ON HEALTH, HUMAN SERVICES AND ELDERLY AFFAIRS

PUBLIC HEARING on Bill # HB 599-FN
BILL TITLE: An Act relative to the therapeutic cannabis medical oversight board.

DATE: 2/23/2021

ROOM: 306-8/Remote **Time Public Hearing Called to Order:** 10:43 am

Time Adjourned: 10:52 am

Committee Members: Reps. M. Pearson, Gay, Cushman, B. King, Marsh, Folsom, McMahon, Nelson, Acton, Kelsey, Kofalt, Weber, MacKay, Snow, Knirk, Salloway, Cannon, Nutter-Upham, Schapiro, Woods and Merchant

TESTIMONY

Representative Acton

After discussion with parties involved he requested ITL.

Michael Holt, DHHS Dir. Medical Cannabis Program

Redundant, un-funded mandate, the time allotted to complete task inappropriate.

Representative Knirk, Chair, Medical Cannabis Oversight Board

Redundant, the board does more thorough research and review, Current board and its member representation is working well.

House Remote Testify

Health, Human Services and Elderly Affairs Committee Testify List for Bill HB599 on 2021-02-23

Support: 3 Oppose: 7 Neutral: 0 Total to Testify: 2

<u>Name</u>	<u>City, State</u> <u>Email Address</u>	<u>Title</u>	<u>Representing</u>	<u>Position</u>	<u>Testifying</u>	<u>Signed Up</u>
Knirk, Jerry	Freedom, NH jknirk@roadrunner.com	An Elected Official	Therapeutic Cannabis Medical Oversight Board	Oppose	Yes (3m)	2/21/2021 6:21 PM
Holt, Michael	Concord, NH michael.holt@dhhs.nh.gov	State Agency Staff	DHHS/TCP	Oppose	Yes (2m)	2/22/2021 4:03 PM
Aronson, Laura	MANCHESTER, NH laura@mlans.net	A Member of the Public	Myself	Oppose	No	2/22/2021 8:55 PM
mclaughlin, michael	concord, NH capitolinsightsgroup@gmail.com	A Lobbyist	Sanctuary Alternative Treatment Center	Support	No	2/23/2021 7:46 AM
Groetzinger, Tonda	Farmington, NH groetzinger6@aol.com	A Member of the Public	Myself	Support	No	2/23/2021 8:47 AM
rosenberger, teresa	Concord, NH trosenberger@bernsteinshur.com	A Lobbyist	Temescal Wellness	Support	No	2/23/2021 11:03 AM
Larson, Ruth	Alton, NH ruthlarson@msn.com	A Member of the Public	Myself	Oppose	No	2/21/2021 10:29 PM
Hayden, Sam	Hopkinton, NH hayden.sam@gmail.com	A Member of the Public	Myself	Oppose	No	2/22/2021 2:35 PM
Fordey, Nicole	Litchfield, NH nikkif610@gmail.com	A Member of the Public	Myself	Oppose	No	2/19/2021 12:47 PM
DeMark, Richard	Meredith, NH demarknh114@gmail.com	A Member of the Public	Myself	Oppose	No	2/21/2021 2:43 PM

Testimony

HB 599 testimony

Feb 23, 2021

Rep Jerry Knirk, Chair Therapeutic Cannabis Medical Oversight Board

The Therapeutic Cannabis Medical Oversight Board (TCMOB) is composed of the Chief Medical Officer of DHHS, a qualifying patient representative, a clinical representative from an ATC and ten medical providers from various fields, charged with the task of advising the therapeutic cannabis program on medical issues, including qualifying conditions.

HB 599 is an unnecessary and unworkable bill, reflecting a lack of knowledge of the complexities of medical decision making and of how the TCMOB functions.

The first part of the bill requires a review and recommendation regarding qualifying conditions in a 90 day time period by the Chief Medical Officer of DHHS who, contrary to what is stated in the bill, is not the chairperson of the board. I am currently the chair. Proper evaluation of a qualifying condition requires much more consideration than that. In my testimony regarding other qualifying conditions which have been considered by the TCMOB you have probably noted the detailed process we have followed.

When TCMOB evaluates a qualifying condition or symptom, we first discuss the condition at a board meeting and appoint a subcommittee to research the literature. The subcommittee reports back to the board at a subsequent meeting. We hold a public hearing on the condition and written comments are accepted. A draft report combining the scientific evidence and the hearing testimony is then prepared by the subcommittee and presented to the full board who discusses the issue, drafts language for any special considerations, and finalizes its recommendation to the legislature. TCMOB functions very well and is diligent utilizing their personal experience, exhaustive literature reviews, and testimonials from patients to make its recommendation.

This bill would side-step this process and force the Chief Medical Officer of DHHS to conduct an inappropriately superficial evaluation of as many as 21 different conditions. Our long range work plan includes reviewing current

qualifying conditions, giving due diligence to the process and that plan should not be circumvented.

The second part of the bill is unnecessary. As a public body, members of the TCMOB already must submit financial disclosure forms just as we legislators do. The inclusion of participation of a representative or the ATCs and some providers who certify patients is not a liability in the deliberations. They are essential for us to make recommendations which are scientifically sound and are workable for the providers, patients, and the ATCs. The requirement in this part of the bill would hold TCMOB board members to a higher level than we hold legislators, who are required to file disclosure forms but are not required to disclose their interests each time before participation in any matter before the board.

I urge ITL on HB 599 as it compromises the ability of the TCMOB to make sound scientific decisions which take into account the needs of the patients, providers, the ATCs and the therapeutic cannabis program.

Archived: Wednesday, March 17, 2021 1:35:57 PM

From: Jerry Knirk

Sent: Sunday, February 21, 2021 6:10:07 PM

To: ~House Health Human Services and Elderly Affairs

Subject: Testimony HB 89, 599, 605

Importance: Normal

Attachments:

[HB 89 testimony.pdf](#) [HB 599 testimony.pdf](#) [HB 605 TESTIMONY.pdf](#) [FINAL REPORT TO HHSEA, OCT 12, 2019.pdf](#)

Committee members,

As the chair of the Therapeutic Cannabis Medical Oversight Board, I will be testifying on HB 89, HB 599, and HB 605.

My testimony for each bill is attached below, along with a suggested amendment for HB 89.

For those who really want to go into the weeds (I could not resist that) I have attached a report to HHSEA from TCMOB regarding adding as qualifying conditions opioid use disorder and insomnia.

Jerry Knirk

Archived: Wednesday, March 17, 2021 1:35:57 PM

From: Jerry Knirk

Sent: Sunday, February 21, 2021 6:28:19 PM

To: ~House Health Human Services and Elderly Affairs

Subject: testimony HB 89,599,605

Importance: Normal

Attachments:

[HB 89 testimony.pdf](#) [HB 599 testimony.pdf](#) [HB 605 TESTIMONY.pdf](#) [FINAL REPORT TO HHSEA, OCT 12, 2019.pdf](#)

Committee members,

I AM SENDING THIS AGAIN AS FOR SOME REASON THERE WAS A LARGE SPACE BETWEEN THE BODY OF THE MESSAGE AND THE ATTACHMENTS. NOW YOU SHOULD BE ABLE TO SEE THEM MORE EASILY

As the chair of the Therapeutic Cannabis Medical Oversight Board, I will be testifying on HB 89, HB 599, and HB 605.

My testimony for each bill is attached below, along with a suggested amendment for HB 89.

For those who really want to go into the weeds (I could not resist that) I have attached a report to HHSEA from TCMOB regarding adding as qualifying conditions opioid use disorder and insomnia.

Jerry Knirk

Bill as
Introduced

HB 599-FN - AS INTRODUCED

2021 SESSION

21-0043

11/05

HOUSE BILL ***599-FN***

AN ACT relative to the therapeutic cannabis medical oversight board.

SPONSORS: Rep. Acton, Rock. 10; Rep. M. Pearson, Rock. 34

COMMITTEE: Health, Human Services and Elderly Affairs

ANALYSIS

This bill requires the medical director of the department of health and human services to conduct a review of qualifying medical conditions under the therapeutic cannabis law. The bill also requires members of the therapeutic cannabis medical oversight board to disclose certain conflicts of interest before participating in matters in which such conflicts of interest exist.

Explanation: Matter added to current law appears in ***bold italics***.
 Matter removed from current law appears ~~[in brackets and struckthrough.]~~
 Matter which is either (a) all new or (b) repealed and reenacted appears in regular type.

STATE OF NEW HAMPSHIRE

In the Year of Our Lord Two Thousand Twenty One

AN ACT relative to the therapeutic cannabis medical oversight board.

Be it Enacted by the Senate and House of Representatives in General Court convened:

1 1 Statement of Intent. The general court recognizes its obligation to ensure the medical
2 oversight board adheres to standard state conflict of interest provisions. Even the perception of
3 conflict of interest could adversely impact the board's statutory role to monitor and contribute to the
4 oversight of the clinical, quality, and public health related matters of the use of cannabis for
5 therapeutic purposes. The general court also recognizes its obligation to protect the health and
6 safety of the 8,302 qualified patients enrolled in the therapeutic cannabis program (TCP 2019
7 Annual Data Report). The United States Surgeon General and the Centers for Disease Control and
8 Prevention have issued recent advisories on the health risks and side-effects of marijuana use.

9 2 Medical Director; Review Required. The medical director, department of health and human
10 services, as chairperson of the therapeutic cannabis medical oversight board, is directed to conduct a
11 review of the current medical and scientific evidence pertaining to approved qualifying medical
12 conditions under RSA 126-X:1, IX and make recommendations to the commissioner to add or remove
13 qualifying medical conditions pursuant to subparagraph RSA 126-X:12, IV(a). This review should
14 include, but not be limited to, recent scientific advances in treatment for glaucoma, epilepsy, PTSD
15 and autism spectrum disorder now in use since passage of the therapeutic cannabis law in 2013.

16 3 Report Required. The commissioner of the department of health and human services shall
17 report on recommended legislation based on the medical director's findings no later than 90 days
18 after the passage of this act to the joint legislative oversight committee on health and human
19 services established pursuant to RSA 126-A:13.

20 4 Therapeutic Cannabis Medical Oversight Board; Membership. Amend the introductory
21 paragraph of RSA 126-X:12, II to read as follows:

22 II. The board shall consist of the medical director, department of health and human services,
23 or designee, a qualifying patient, appointed by the commissioner of the department, a clinical
24 representative from an alternative treatment center, appointed by the commissioner, and 10 medical
25 providers also appointed by the commissioner. ***Board members shall, prior to participating in
26 any matter, disclose whether they have a private, financial, or pecuniary interest which
27 may directly or indirectly affect or influence the performance of their duties relative to
28 that matter.*** The medical provider members shall represent the following fields:

29 5 Effective Date.

30 I. Sections 1 and 4 of this act shall take effect 60 days after its passage.

31 II. The remainder of this act shall take effect upon its passage.

**HB 599-FN- FISCAL NOTE
AS INTRODUCED**

AN ACT relative to the therapeutic cannabis medical oversight board.

FISCAL IMPACT: State County Local None

STATE:	Estimated Increase / (Decrease)			
	FY 2021	FY 2022	FY 2023	FY 2024
Appropriation	\$0	\$0	\$0	\$0
Revenue	\$0	\$0	\$0	\$0
Expenditures	\$0	Indeterminable Increase	Indeterminable Increase	Indeterminable Increase
Funding Source:	<input checked="" type="checkbox"/> General	<input type="checkbox"/> Education	<input type="checkbox"/> Highway	<input type="checkbox"/> Other

METHODOLOGY:

This bill makes several changes to the therapeutic cannabis medical oversight board, including:

1. Transferring responsibility from certain clinical review and research functions from the 13-member board to the Medical Director of the Department of Health and Human Services. Such review would involve a combination of 21 identified diagnoses.
2. Requiring that the above review be completed and reported to the Joint Legislative Oversight Committee on Health and Human Services within 90 days of the bill’s passage. The Department notes that this is an additional reporting requirement beyond the current annual reporting requirement of the board.
3. Adding language related to conflict of interest of board members, requiring disclosure of a private, financial, or pecuniary interest in certain board matters.

The Department states that (1) and (2) above would require additional resources, but that the amount of any such increase is indeterminable.

Any fiscal impact is assumed to take place in FY 2022 and beyond.

AGENCIES CONTACTED:

Department of Health and Human Services