

March 8, 2017

TO: The Honorable Senator Ginny Burdick, Co-Chair
The Honorable Representative Ann Lininger, Co-Chair and members of the
Joint Committee on Marijuana Regulation

From: Anthony Taylor, President,
Compassionate Oregon

Re: SB 863

Dear Committee Members,

In response to last night's hearing and the subsequent confusion around SB 863, Compassionate Oregon would like to provide the committee with additional comments in follow-up to our submitted testimony in support of this bill.

In our initial support of SB 863 we focused primarily on the information collected and retained in OLCC stores. The situation in the OHA dispensary system is much different and it is, therefore, much harder to destroy information.

We agree in principle with the idea of protecting the identities of patients and consumers. We are concerned about patients' protection from prosecution (a key part of the OMMA) being put at risk because they can be easily identified by this information. In our view, the sharing of any such information between agencies will provide a clear path back to the customer or patient should investigations from the newly-elected administration be forthcoming.

I would also add that Mr. Ourso's comments did not surprise me and, although he stumbled at first in his explanation about the requirements of the OHA tracking system and its use of the patient ID#, he is correct in his defense of retaining information beyond the 48 hours as outlined in SB 863.

I was also not as surprised as Sen. Prozanski and other members of the panel appeared to be when expressing concern that the OHA had signed off on this bill and were then offered a different perspective by Mr. Ourso's testimony. While we can sympathize with the members, this should not reflect poorly on Mr. Ourso. We need only reminded members that patients have often felt this frustration over the years of being told one thing by OHA only to discover things had taken a different course.

Let me explain more fully:

The patient card number is integrated into all levels of the OHA reporting system as well as being part of the daily reports required in OLCC stores. Members are encouraged to review OHA INFORMATION BULLETIN 2016-17 for a detailed explanation of these reporting requirements.¹

In the OHA monthly reporting system used for tracking, that process for dispensaries begins with the transfer of product into the dispensary through the Authorization to Transfer forms by which growers and patients enter their excess usable marijuana into the dispensary system. The patient ID# is required on this form and is used to track this information as it travels through the system.

The patient ID#, as Mr. Ourso stated, follows that product through the system and is required for accurate reconciliation of monthly inventory reports submitted under the online reporting requirements by growers, patients, dispensaries and processors in reporting production and transfer activity. The patient ID# is used to reconcile inventory on hand vs. amounts transferred from that inventory to help guard against diversion. Should this reporting indicate that a grower has transferred in more product than his inventory shows is available, a follow-up investigation may be initiated.

Growers are required to report all transfers during their OHA-mandated monthly reporting, including those made to dispensaries and processors. This is a complicated system and, although it was not explained very clearly at first, Mr. Ourso did outline the need for retention of information beyond 48 hours. He did, however, misstate reporting that is required of dispensaries.

All dispensaries must submit an itemized monthly report indicating what was transferred in and what was purchased each day by patients. All information regarding transfers by growers also must be included in the online report filed at the end of each month by OHA dispensaries. This information is reported using the MMD# and the patient ID#. For instance, a report would show the date of purchase and how much of what product is purchased by what cardholder. This is very sensitive information and, to the committee's credit, should be cause for concern.¹

In defense of the OHA's reporting system, the patient number is critical and cannot be easily expunged. In the final analysis, some aspects of the OHA reporting system will need to be adjusted to facilitate the committee's desire to protect customers and patients under SB 863.

¹<https://public.health.oregon.gov/DiseasesConditions/ChronicDisease/MedicalMarijuanaProgram/Documents/Dispensary-reporting-requirements.pdf>