

To Whom It May Concern,

My name is Kris McAlister, and I am a patient, grower, and caregiver in the medical cannabis program in this state.

I am writing to share my concerns regarding both the testing and the combining practices being suggested in HB2198, and all the bills affecting medical cannabis, the OHA and OLCC shared tasks or oversight; on the local, state, and national level.

First, I would like to request that testing practices instituted upon the medical program, due to consumer safety, be reflected in any and all testing requirements for the state, as the need for those changes were in part advocated for by persons who have since left the statutorily weakened medical program, and sought participation in the enhanced and protected vice use program. Having a standard of 100% batch testing for medical, and 1/3 allowance for recreational use speaks to this issue.

With recreational shops allowed to sell to medical, as lobbied for by cannabis industry, the difference in standards through statute favoring recreation business jeopardize patient consistency, program consistency, and creates legal murkiness.

Since our state program is under the legal protection of the state administration, I have concerns about how the program has suffered due to legislative redirection of OHA/OMMP personnel to focus on vice use protocols and staff time, while billed members of the protected class receive reduced service hours, limited staff time, and redirection to a website that is current on licensing items but not so much on notification of public hearings, or accessing their advisory committee for medical cannabis. Attempts to get resolution through the advocacy and constituency services result in a redirection to the incomplete website for patients, the local governments, and the legislature. It took four weeks, and two attempts to get the appropriate time for the next ACMM meeting to be accurately posted on the OMMP site, today, with the last update having been four months before, though meetings were scheduled.

On the federal level, statements from the current administration show an acknowledgement of the value of medical marijuana, but a lack of compassion for states pursuing legal vice use. With statements reflecting the same from the recently seated Attorney General, I feel that the work to combine the two programs makes participants in the medical only program, potential targets for criminal investigation, through the actions of the legislature.

I understand this is a complex issue. and I do not claim to have all the answers.

I just do not wish for our sickest of the sick, and those who aided them, to be harassed in the same manner, as they have in our state over the past two years, as our government works out the details, without a real voice.

I feel an expansion of the ACMM, modification of the proposed Medical Use Board, or at least a patient panel before this body, might help better advise the needs of those who were "not

affected by M91".

Thank you for your time.

Respectfully,

Kris McAlister
Springfield