

Madams Co-Chair, Esteemed Legislators,

For the record, my name is Kris McAlister, of Springfield.

I want to first thank you for your consideration of items that could help some of our sickest people of the state.

As you have probably recognized in the past 3 years, the medical cannabis system is both complex, and confusing.

With many attempts to establish foundations in a frontier not well known, one sometimes has to just take a path and see it out.

I hope, and quite possibly against your collective wish, that this body remains for the next session, the short session, to possibly see that HB 2198 is rolled out as envisioned, and potentially gaps in the medical field could be given the skilled focus honed by three years of applied experience. I do not think there is any other body in our state government more adept at the topic, than this committee. I do not believe that any other body has had to get this intimate into the topic, as this one has been tasked. At the very least, should the opportunity present itself, that some of you consider a medical cannabis committee, as a vehicle to share this archived experience for the betterment of a population that has been through a lot.

I thank you again for this time served.

As a follow up to this, I hope that the ideas that came of the process, but perhaps not included in the final bills are stewarded to capable hands, should they be able to collectively aid in the state, and to a more direct focus, the patients, whose program and experiences helped foster a new understanding of an ancient plant.

We have many unanswered questions, and unaccounted realities that are not covered in our comprehensive cannabis tomes, and I fear that we may see good people criminalized for doing the right things, in the spirit of the original medical Cannabis act, due to the restraints of the new system, and time constraints of the governing parties.

I sincerely hope that we see a mix of patients and providers in the statute established rule making body overseeing our sickest, so that the experiences of those whom need data driven, treatment yielding outcomes (not market or political ones), are able to have a meaningful representation. Many of them do not have long on this plane, or have spent more than their due in pain. It is for those I ask your consideration, with steps forward.

We have a chance to make life better for all Oregonians who are willing to work towards it. I appreciate your service and consideration, one honor bound individual, to others.

I feel elements of SB 56, will in effect, create more diversion, when coupled with other bills setting up the market, has a possibility of setting up good faith actors for penalty, while it also showcases the unanswered questions referenced above.

Where does government restricted excess go, if government mandated channels can be adjusted while working in conjunction with markets?

Thank you for the opportunity to share my thoughts, concerns, and to give you thanks as this committee winds down for the session. Please feel open to following up, on anything discussed this session, or previously, or if there is a way that I may help our patients move forward.

Respectfully,

Kris McAlister
Springfield

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