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Testimony to the Senate Judiciary Committee supporting SB 1561, Section 42 as written.

Dear Senate Judiciary Committee Chair Prozanski, Co-Chair Thatcher and Judiciary Committee Members, medical professionals and their patients listening to this hearing.

I am Michael D. Rochlin, RN, a Cannabis Nurse and advocate for public safety & health and patient rights.

- President & Founder of **Confidential Therapeutics**, a medical consulting firm
- Director of the **Oregon Cannabis Clinicians Group**, a private not for profit Oregon state professional association of licensed clinical healthcare providers serving Oregon patients
- Board member of the **American Cannabis Nurses Association (ACNA)**, a national not for profit professional Nursing Specialty Practice organization with more than 1300 members in 48 states.
- Board Member of **Project: Scarecrow**, a 501(c) (3) charitable organization, advocating for a model of OMMP patient donations for those who can not afford their cannabis medicine.

SB 1561 Section 42, is a substantial improvement for Medical Cannabis patient rights, based upon the Oregon Cannabis Commission (OCC) Legislative report Recommendations issued on Jan. 2019.

If passed, this bill will help support the hard work of the OCC, patient advocates, stakeholders and state Agencies that are meeting to ensure that OMMP remains viable, safe and effective for patients.

To my knowledge, Oregon Cannabis Clinicians Group (OCCG) is the only state professional organization with licensed healthcare professionals advocating for excellence in clinical practice with Cannabis as medicine. Our members include licensed Nurses, Physicians, Naturopaths, Pharmacists, and others that support rationale Policy, to protect patient rights and public safety.

The American Cannabis Nurses Association (ACNA) is the largest National Professional Nurses Association, and specializes in the human endocannabinoid system; we have more than 1300 members, in 48 states, developing evidence-based Policies for Clinical Practice.

ACNA is establishing benchmarks and determining what is good practice, so that Nurses can protect patient rights and safety; A document that was approved and issued by the National Council of State Boards of Nursing (NCSBN) in 2018, still has not been

adopted by NCSBN member state boards, including Oregon, due partly to the stigma and confusion about liability (Cannabis is still Schedule 1 Federally, however, the NCSB report deals with this issue).

SB 1561 offers a major improvement for Primary Care Practitioners, like NPs, to protect patients' rights and safety.

Currently, ONLY MDs and DOs can authorize OMMP cards for medical use. Nurse Practitioners (NP) are independent practitioners, and provide in depth medical diagnosis, treatments, consultations and education to patients.

This bill can help the mainstream conversation with NP's and their patients, with legal protection for medical conversations, as the original Oregon Medical Marijuana Program (OMMP) intended; The provider aspect has not worked to accomplish it's goal due, to institutional resistance, fear of liability and lack of education - the stigma continues: current anecdotal reports have reported that Doctors tell patients they can't talk about Cannabis...and then tell them to talk to a "budtender," for (treatment) advice.

This type of report does not appear to be clinically appropriate for any other medicine or treatment; we support having NPs ability to authorize cannabis medical use and to be protected by regulation, which will also protect NP practice, license and patient rights.

This bill helps bring Medical Provider and Patient rights up to date, in the 21st Century, and normalize treatment vs punitive stigmatization.

Patient rights with Oregon providers of Medicare, Medicaid and other payer programs are being impacted;

Patients and providers are discriminated vs other medical/pharmaceutical treatments that may be less effective and potentially more harmful.

Patient Rights include the ability for the patient to be informed of all options, and Nurses are willing to provide the information; however, the state nursing board (OSBN) recently stated that Cannabis is a Controlled schedule 1 drug and Nurses cannot talk with their patients about it.

This bill would help change that response, and would not prohibit discussion of a medicine that is legal in Oregon, used by a large part of the population for self-medication, and can be part of the mainstream intake/clinical conversation with patients about treatment.

The VA is reported to allow providers to discuss cannabis with their patients, and they are Federal, so why this License in Oregon?

Prohibition and institutional resistance continues to harm the patient/provider relationship, built on trust.

As the House Health care Committee addresses the inequities of safe and affordable mental health treatment vs physical health fee for service medicine, the science of the endocannabinoid system (eCS) science continues to be ignored because of the stigma.

Providers of Healthcare need to learn about how the eCS works with the human physiology, and research indicates that the eCS is the master regulator of the human body. Phytocannabinoids (the plant that contains most of the cannabinoids and terpenes) can help restore balance to the eCS, if lifestyle, mobility and diet are addressed through patient education. Not a quick fix (unlike pharma commercials); it takes commitment by the patient and a willing provider, to be sustainable. Not to mention appropriate reimbursements for outcomes not fee for silo services that are less than effective and escalating in cost. The costliest: pharma drugs. The cannabinoids have been shown in preclinical studies to reduce need for single molecule drugs that interact and cause the need for other drugs to counteract adverse effects (e.g., opioids cause constipation, so they get drugs for that condition).

Please pass SB 1561, Section 42 as written; it supports well-thought out and rationale recommendations by OCC, and lessens stigma for medical providers and their patients who choose to use Cannabis for medical reasons.

Thank you for your consideration on this matter.

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