<u>Testimony Against HB 4035 - Directs Oregon Health Authority, Oregon Liquor Control Commission, State</u> <u>Department of Agriculture and Governor's office to develop plan to address issues related to regulatory</u> <u>authority over marijuana.</u>

I oppose HB 4035. It's rather shocking and dismaying to me to see how proposed legislation, HB 4035 – a bill to authorize the development of a plan to consolidate marijuana programs in Oregon, does not include medical marijuana patient representation. How can this be offered as a valid cross section of the universe of Oregon stakeholders with interests in regulated cannabis?

HB 4035 as drafted does not include participation by the Oregon Cannabis Commission (OCC), an advisory board chartered to support patient access to cannabis and the Oregon Medical Marijuana Program (OMMP). Why did the legislators repeatedly cite the work and mission of the Oregon Cannabis Commission yet not empower this group to participate in the crafting of the program?

I believe this omission underscores the disenfranchisement and patient social equity issue that I referenced in my comments on HB 4088, to develop a cannabis social equity program (that also completely leaves cannabis patients and their voices out of consideration.) I suggest that omission of medical cannabis patients from policy formulation that directly impacts them is a side effect of medical cannabis stigma and social marginalization. I recommend that members of the committee respectfully review the materials on medical cannabis stigma and social inequities experienced by medical cannabis patients that I submitted on behalf of comments on HB 4088.

The voices of medical cannabis patients must be considered in crafting the future of a cannabis program whose scope includes the medical program.

Respectfully submitted,

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