Connecticut Department of Consumer Protection
Medical Marijuana Program - Public Act 12-55
Board of Physicians
Minutes
November 14, 2012

Members Present: William M. Rubenstein Commissioner
Dr. Jonathan Kost
Dr. Godfrey Pearlson
Dr. Robert Siegel
Dr. Deepak Cyril D’Souza (Skype)
Dr. David Greco (Absent)

DCP Staff Present: Michelle Seagull Deputy Commissioner
Claudette Carveth Director of Communications
Gerry Garcia Chief of Operations
Xaviel Soto Health Program Associate
Peter Krzykowski Health Program Assistant

Call to Order:
Commissioner Rubenstein called the meeting to order of the Board of Physicians for Connecticut’s Medical Marijuana Program at 8:38am at the Department of Consumer Protection, 165 Capitol Avenue, Hartford, Room 101.

Approval of Prior Meeting Minutes
On motion made by Commissioner Rubenstein and unanimously voted, it was resolved that the minutes of the September 12, 2012 and October 10, 2012 meetings be accepted as distributed.

Status Report on Program Implementation
October 1, 2012, DCP started the process of temporarily registering patients. The process is underway and going very smoothly. Physicians have not thought the process was difficult and patients seem to be able to log onto the system and register. In terms of numbers, 127 patients have been certified by physicians, 43 which have been entirely through the registration process (43 registration cards issued), 39 others have been approved and pending issuance of the cards and the rest are somewhere along the process of getting us the information that patients need.
Currently 32 physicians have registered into the system and are capable of certifying patients. There is at least one patient in each of the various debilitating condition categories so it is spread widely across the category groups.

Physicians can check to see if their patients have finished with the registration process. A complete list of all their patients will show up under the physician’s profile.

The members discussed whether it would be beneficial to break the diagnoses into subcategories. Further discussion would be needed.

Concerning the timeline for creating regulations for dispensing, for production and for how the board is going to operate, Commissioner Rubenstein is hoping to get a full and complete set of proposed regulations out in early 2013. He stated that they need to be through the full proposal process, public hearing process, approval process and submitted to the General Assembly’s Regulation Review Committee by July 1, 2013.

Rules for the Board’s Consideration of Petitions Regarding Additional Debilitating Conditions

Commissioner Rubenstein stated that the process envisioned would be to receive petitions that request certain kinds of support which are laid out in the regulation. There would be a public hearing on the petition and the board would consider the materials submitted with the petition. The board would also have the ability to consider other information from other interested parties or that was brought to the attention of the board by its members. It will be up to the board to ultimately decide what the appropriate criteria are and how rigorous the science needs to be. There was a discussion of how other states determine whether to recognize additional conditions. Peter Krzykowski did research on other states and gave a brief update. He reported that most of the states are following a process similar to Colorado’s. In Colorado when any kind of new criteria comes up for review, they ask a group to be a representative. They ask that group to provide them with a petition of a number of people who are petitioning to have this added on and also ask for a number of evidence-based items to be provided. They also ask for evidence to be provided as far as articles with scientific data showing large scale research studies that have shown the benefits of this versus what is conventionally available right now. Since 2001 Colorado has had a number of debilitating conditions that have come up and they have denied all of them. They have not expanded their criteria at all. Mr. Kryzkowski will check to see if they issue written decisions on these petitions.

Colorado’s pre-existing list includes:

- Cancer
- Glaucoma
- HIV & Aids
- Wasting Disease
- Persistent Muscle Spasms
- Seizures
- Severe Nausea
- Severe Pain

Some states have what’s been termed a “catch-all” category like in Colorado with severe pain. There’s no definition as what severe pain is.
Commissioner Rubenstein noted that the Connecticut Statute describes a “debilitating condition,” but that there is confusion between what is the disease and what is the symptom that’s being treated as opposed to the disease. He raised whether or not it makes sense to look at the current list and ask what is being palliated by the use of marijuana and are there other conditions that cause those same symptoms to the same degree that seem like they benefit in the same way.

Dr. Pearlson stated that The National Institute of Health has a separate branch for complementary and alternative medicines. He stated that it might be interesting in finding what their criteria are for initiating a trial of an untried complimentary medicine. Dr. Pearlson will try to get this information to forward to the board.

Commissioner Rubenstein commented that what we want to do in the regulation is make sure we capture what the board would like to see in a petition to the extent that it exists.

Commissioner Rubenstein also stated that what we’re most interested in now is making sure in that process that we’ve captured the information that is the most useful.

At the closing of this meeting, Commissioner Rubenstein stated that the objective is to move forward with the regulations. To go back and add the things in that was discussed today and fold it into what is going to be the proposed regulations.

**Adjournment:**

Commissioner Rubenstein adjourned the meeting at approximately 9:46am.

**Next Meeting:**

Scheduled for Wednesday, January 9, 2013 @ 8:30am, Room TBA.