

**Testimony by Stephen Dahmer, MD
Chief Medical Officer, Vireo Health of New York**

**Presented to the Health Committee's Joint Legislative Public Hearing
on 2021 Executive Budget Proposal**

Thursday, February 25, 2021

Good morning and thank you for providing me this opportunity to offer you my testimony. My name is Dr. Stephen Dahmer, and I am the Chief Medical Officer of Vireo Health of New York (“Vireo”), one of ten Registered Organizations licensed to grow, process, and sell medical marijuana in the state.

In addition to my work with Vireo, I serve as a practicing family physician in Scarsdale, New York and as an Assistant Clinical Professor of Family Medicine and Community Health at the Icahn School of Medicine at Mount Sinai Hospital in New York City. I am a board-certified physician and hold a Doctor of Medicine (MD) degree from University of Wisconsin-Madison.

I applaud the Senate and Assembly’s commitment to improve the state’s medical marijuana program and strongly support legislation that would increase the number of medical dispensaries as well as trust a healthcare practitioners’ discretion to recommend cannabis as a treatment. I am here today to urge you to include dry flower as an approved medical cannabis form in the legislation.

By way of background, Vireo has been a proud participant in New York’s medical marijuana program since its inception and has served thousands of patients, with debilitating conditions, throughout the state. Our manufacturing facility in Fulton County is built on the former site of a juvenile detention facility. Our dispensaries are in Queens, White Plains, Albany, and Binghamton and have continued to operate fully throughout the pandemic with appropriate safeguards.

Our company currently employs more than 100 New Yorkers, many of whom are represented by United Food and Commercial Workers Local 338, including pharmacists and pharmacy technicians. Vireo is deeply committed to diversity and social equity issues and is proud that more than 65% of its workforce is diverse.

As a physician who has worked in the State’s medical marijuana program since 2015, I am proud to have watched the New York medical cannabis program carefully evolve. Vireo is very encouraged by the number of New Yorkers who have alleviated their health conditions and serious symptoms with medical cannabis - a safer, less dangerous option to other traditional pharmaceuticals like opioids.

Cost remains the top concern relayed to us by our patients across the state, particularly patients of color who are disproportionately impacted by high prices and a lack of access to the program. For many New Yorkers, medical cannabis is simply too expensive, despite our best efforts to make our products more affordable through compassionate discounts, product innovations, loyalty programs, and even clinical trials. The reasons for the high costs are many, including the fact that health insurance does not cover the costs of medical cannabis. Therefore, all patients must cover the full cost of these products out-of-pocket.

To increase the number of New Yorkers who benefit from the medical cannabis program, steps must be taken to make the program more affordable, accessible, and attractive. The simplest, most effective way to achieve this goal is to reduce the cost of medical cannabis by allowing it to be utilized in its most natural state — as whole and dry flower.

New York State law has already decriminalized cannabis flower - residents can publicly possess up to 2 ounces of cannabis without criminal penalties. Yet New York registered medical patients can only access dry flower in a limited form - as ground meter flower, which they have not widely embraced. Meanwhile, whole dry cannabis flower is readily available in neighboring states –New Jersey, Massachusetts, and Pennsylvania – and too easily obtained through the dangerous, unregulated illicit market prevalent in New York.

Not allowing dry flower and the prohibitive pricing of other medical cannabis products is, in large part, responsible for low enrollment in New York’s program. Today, fewer than 140,000 New Yorkers, or 0.7% of NY’s population, is enrolled in the state’s medical cannabis program. By comparison, in New Jersey over 1% of the population and in Massachusetts over 1.5% of the population is enrolled in those state’s respective medical cannabis programs. Meanwhile, medical cannabis programs in other states with dry flower exhibit even greater access – Arizona and New Mexico both had participation rates of over 3% in 2019.

Increased participation in the medical cannabis program is undoubtedly a question of public health. According to the New York State Department of Health, there were 3,224 overdose deaths in 2017 of which 1,044 involving commonly prescribed opioids. There was a 200% increase in the number of opioid overdose deaths in New York between 2010 and 2017. In that same timeframe, exactly zero New Yorkers have overdosed from cannabis.

As a physician I believe that growing the state-regulated medical cannabis program will also help protect public health and safety by limiting the number of New Yorkers who regularly use cannabis purchased illicitly. Patients who cannot afford the state’s program, even after relief with our state-regulated products, often seek out their “medicine” through these illicit markets. This unfortunate reality leads to vulnerable patients using unsafe and untested products without guidance or support. In the illicit market, there is no tracking of a product’s potency nor its potential contamination with pesticides, heavy metals, or other adulterants.

Allowing cannabis flower would reduce prices, greatly benefit existing patients, and make the program more accessible to new patients. Dried flower, if approved as a medical form, would no longer be purchased on the street, but dispensed by licensed pharmacists, followed by established pharmacovigilance tracking, monitored on our state prescription monitoring program, and be included in one of the most robust ongoing longitudinal observational clinical trials in the United States of real world medical cannabis ([MEMO](#)).

Thank you all for your work on this important issue and for allowing me to share my testimony. I stand ready to assist you and your legislative colleagues in any way possible on this matter.