

STATE OF NEW JERSEY  
Department of Health

---

September 18, 2017

Public Hearing

IN RE: MEDICINAL MARIJUANA REVIEW PANEL

B E F O R E:

CHAIRMAN ALEX BEKKER, M.D., Ph.D.

PANEL:

CHERYL A. KENNEDY, M.D.

JESSICA ANNE SCERBO, M.D.

STEPHANIE ZARUS, PHARM.D.

MARY M. BRIDGEMAN, Ph.D

Reported by: Angela R. Waters, CCR.

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(1) CHAIR ALEX BEKKER: Ladies and  
(2) gentlemen, good morning. My name a Dr. Alex  
(3) Bekker. I am the Chair of the Medicinal  
(4) Marijuana Review Panel.

(5) Also in attendance today are all  
(6) the members of the Medicinal Marijuana Review  
(7) Panel: Dr. Jessica Anne Scerbo, Dr. Stephanie  
(8) Zarus, Dr. Mary Bridgman, Dr. Cheryl Kennedy.  
(9) Not all the members of Medicinal Marijuana  
(10) Review Panel are present today, but this  
(11) hearing is being transcribed. And I assure  
(12) you that the transcript, along with any  
(13) written comments submitted today, or at any  
(14) time during the public comment period, will be  
(15) sent to all panel members for their review and  
(16) consideration.

(17) Notice of this hearing has been  
(18) posted on the department's website and sent to  
(19) the Secretary of State who posted the notice  
(20) in a public place. Notices also were  
(21) published in two newspapers: The Star Ledger  
(22) and Courier Post.

(23) Today's hearing is being  
(24) held to invite comments about the panel's  
(25) initial recommendation to add qualifying

(1) condition to the medicinal marijuana program.  
(2) No comments will be provided by members of the  
(3) panel today. We will be scheduling another  
(4) meeting to (1) further discuss our initial  
(5) findings, especially in light of all public  
(6) comments received; and (2) to vote on changes,  
(7) if any, to our initial recommendation. That  
(8) meeting will be scheduled following the  
(9) Panel's review of today's transcript and all  
(10) submitted written comments. Once a final  
(11) determination is submitted to the Department  
(12) of Health, the commissioners has up to 180  
(13) days to issue a final decision.

(14) On July 21st, 2017 the Medicinal  
(15) Marijuana Review Panel submitted its initial  
(16) recommendation to Commissioner Bennett. The  
(17) initial recommendation was based on the  
(18) panel's review of 45 petitions to add  
(19) qualifying conditions for purposes of  
(20) participation in the Medicinal Marijuana  
(21) Program.

(22) In summary, the panel recommended  
(23) that the Commissioner grant petition for  
(24) chronic pain related to muscular  
(25) disorder, migraine, anxiety, chronic pain and

(1) visceral origin and Tourette's syndrome. The  
(2) panel also recommended that the Commissioner  
(3) deny petition for asthma and chronic fatigue  
(4) syndrome.

(5) On July 21, 2017 the panel's  
(6) initial recommendation was posted on the  
(7) department's website. The panel will be  
(8) accepting public comments on its initial  
(9) recommendation for a period of 60 days until  
(10) September 25, 2017.

(11) In the interest of making efficient  
(12) use of the time for today's hearing, each  
(13) speaker will be limited to three minutes. If  
(14) you have longer written comments with you,  
(15) please provide a copy to the panel and they  
(16) will be added to the record.

(17) Anyone interested in speaking  
(18) today should sign in on the speaker sheet.  
(19) Anyone who wishes to submit written comments  
(20) after today's hearing is encouraged to do so.  
(21) Such comments must be submitted no later than  
(22) Monday, September 25th, 2017, and should be  
(23) addressed to the Medicinal Marijuana Review  
(24) Panel in care of the Department of Health at  
(25) PO Box 360, Trenton, New Jersey 08625. The

(1) contact information is also available on the  
(2) Department's website at WWW.  
(3) NJ.GOV/health/medicinalmarijuana. Your  
(4) comments are a very important part of this  
(5) process. And thank you.

(6) Our guests are open for  
(7) comments. We have actually people who signed.  
(8) So first would be Ken Wolski. And he  
(9) represents CMMNJ.

(10) KEN WOLSKI: Yes. Dr. Bekker  
(11) and members of the panel, my name is Ken  
(12) Wolski. And I'm a Registered Nurse and I'm  
(13) the Executive Director for the Coalition of  
(14) Medical Marijuana in New Jersey. I want to  
(15) thank the panel for its initial  
(16) recommendations -- initial approval of 43 --  
(17) 45 petitions that coalition -- members of the  
(18) coalitions were involved in a number of those  
(19) petitions and we're very gratified to get the  
(20) kind of duniya suna fara(phonetic) efforts.  
(21) Our only concern now is the pace of the  
(22) program. It's over a year that the Department  
(23) of Health that's accepted these petitions for  
(24) consideration. And now it looks like the  
(25) department still has six months. So we would

(1) urge the department to act expeditiously in  
(2) making its final recommendation and making  
(3) its approval of these conditions. Delays only  
(4) cause more suffering. Thank you very much.

(5) ALEX BEKKER, M.D., Ph.D: Thank  
(6) you. The next person is Jim Miller. He also  
(7) represents CMMNJ.

(8) JIM MILLER: Yes, i'm  
(9) cofounder of the Coalition for Medical  
(10) Marijuana along with Ken. We founded it just  
(11) shortly after my former wife died from  
(12) multiple sclerosis. So I've been aware of  
(13) medical marijuana for the last -- since  
(14) 1990-'91 with her.

(15) I want to thank the panel for  
(16) -- well basically for doing your job. There  
(17) was some skepticism that there would be  
(18) resistance for some reason. And as I said to  
(19) Dr. Bekker earlier to recommend Tourette's  
(20) based on the factors that there is no  
(21) available help right now in any other way.  
(22) That's what doctors are supposed to do. So  
(23) kudos for that.

(24) I'd like to also say that -- Dr.  
(25) Noah isn't here. Somebody voted "no" on

(1) every, every recommendation when I was here  
(2) before in the votings that were going on. And  
(3) I don't even see how that's possible for  
(4) somebody to say "no" to all these  
(5) recommendations that you all supported. So  
(6) I'm an old timer. I remember in the Olympics  
(7) where -- when anything came to the scores like  
(8) that, you throw out the lowest and throw out  
(9) the highest, because East Germans always gave  
(10) us low marks, you know? It's just the way it  
(11) was. So consider the East Germans to throw  
(12) out the lowest; throw out the highest. And  
(13) what you got is you're unanimous for support  
(14) for what patients already know to be true.  
(15) If there was some way -- I can't urge you to  
(16) act with all due haste, but my real problem is  
(17) is you are the experts. And now this is going  
(18) to someone who is a nonexpert to what, to  
(19) validate, to correct your homework? What?  
(20) It seems to me that your recommendations  
(21) should be paramount. And I cannot believe  
(22) that a lot of this is going on because  
(23) legislatures listed the original list.  
(24) Legislatures, not doctors. I mean how that  
(25) happened in 2009, I don't know. But we owe



(1) the patients an apology. And you've come  
(2) closest to doing that by your heartfelt and  
(3) clinical expertise.

(4) So mostly I'm here to thank  
(5) you, all except one guy who is not here. So  
(6) thanks for everything.

(7) ALEX BEKKER, M.D., Ph.d: Thank  
(8) you. So next speaker Amy Roth. And Amy Roth  
(9) represents, I guess --

(10) AMY ROTH: Hi, I have written  
(11) something I want to go over.

(12) I'm here today to advocate  
(13) increased access for medical marijuana by  
(14) increasing the number of dispensaries in the  
(15) state, by adding satellite locations within  
(16) the same region, and by permitting home, home  
(17) cultivation.

(18) Who am I? My name is Emy Roth.  
(19) I reside in Union County, District 21. And  
(20) I've been researching medical marijuana and  
(21) have become completely engrossed and obsessed  
(22) with the topic ever since I learned it became  
(23) medically legal in New Jersey. So I began  
(24) researching. I was reading possibly  
(25) everything I can get my hands on, including

(1) hundreds of articles and studies on the plant.  
(2) I am privileged in working out of a dispensary  
(3) where I furthered my research and education in  
(4) the field. One common factor was the  
(5) complaint on how far patients had to travel to  
(6) purchase their meds. And to be honest, I  
(7) think it's an outrage for it to take  
(8) anywhere from 30 to 60 minutes or more in  
(9) order to visit a dispensary. Patients would  
(10) say: I traveled 40 miles. There's no way to  
(11) get in my car. My disability check didn't  
(12) come yet. I'm going to have to do this check  
(13) again in a few days. In a way it's almost  
(14) counteracting the working of the medicine  
(15) because many patients cannot sit in a  
(16) car for that length of time. And first of all  
(17) for so often, and when -- and an example  
(18) I thought of is what if you were looking for  
(19) a house. You came to New Jersey. And the  
(20) realtor said: Oh, the closest pharmacy is 30  
(21) miles away. Would you buy that house? Okay.  
(22) 20 miles away; even 10 miles away. To allow  
(23) someone live with contractible musculoskeletal  
(24) spasticity, which generally causes pain equal  
(25) to child birth, sitting in a car for -- to

(1) sit in a car for more than a few minutes is --  
(2) can be actually mean. That's unconscionable.

(3) Let's set the standard here for  
(4) others. To date New Jersey has five operating  
(5) dispensaries. In the summer the sixth one has  
(6) been authorized to ground. This is clearly  
(7) not even access. Everywhere there's a  
(8) pharmacy there should be a dispensary.  
(9) Existing dispensaries should have satellite  
(10) locations just like pharmacies. There are  
(11) well over -- I think it's -- 12,000 patients,  
(12) approved patients with debilitating conditions  
(13) that travel all over New Jersey -- hundreds of  
(14) miles -- for very, very much needed legal  
(15) medical plant food.

(16) I'd like to see -- let's expand the  
(17) dispensaries' ability to have locations near  
(18) cancer centers.

(19) I would appreciate another  
(20) minute? Is that okay?

(21) ALEX BEKKER, M.D., Ph.D: Yes.  
(22) Granted.

(23) AMY ROTH: Thank you.

(24) Let's widen the dispensaries'  
(25) ability to have locations next to cancer

(1) centers, doctors' offices, and nursing homes.  
(2) For example, Summit Medical Group has  
(3) partnered with M.D. Anderson and together are  
(4) building a state-of-the-art complex here in  
(5) New Jersey. And there should be a dispensary  
(6) in close proximity for convenient access  
(7) before or after treatment.

(8) As for nursing homes, recent  
(9) statistics also say the elderly usages weigh  
(10) up while teen usage has declined. What we  
(11) have today is barely accessible. It's  
(12) difficult to know that we can be debilitated  
(13) to the point where we want to throw in a  
(14) towel, when we have this magical miraculous  
(15) weed plant at our disposal. Yet making it so  
(16) difficult to legally attain, it's almost  
(17) ridiculous.

(18) ALEX BEKKER, M.D., Ph.d: You're  
(19) welcome to submit your comments to the  
(20) Department of Health.

(21) AMY ROTH: Okay. I literally  
(22) have 20 more seconds.

(23) ALEX BEKKER, M.D., Ph.D: Okay.

(24) AMY ROTH: I'd like to see New  
(25) Jersey be the model of the idea for the ideal

(1) model for this country. We're in a great  
(2) position increasing qualified physicians,  
(3) increasing access and last but not least  
(4) including homegrown. Thank you for  
(5) the opportunity to speak. I'm very much more  
(6) interested in further communication with you  
(7) on this. So please please please please do  
(8) the right thing for patients of New Jersey.

(9) ALEX BEKKER, M.D., Ph.d: Thank  
(10) you, Mrs. Roth.

(11) The next presenter speaker is  
(12) Ms. Laura Carter. She presents WFWP. I'm not  
(13) quite sure what it means, but go.

(14) LAURA CARTER: Good morning.  
(15) My name is Laura Carter. And I'm a United  
(16) States Air Force Veteran and also the founder  
(17) of a veteran medical cannabis support group;  
(18) that's WFWP; that's Weed for Warriors Project.

(19) I founded that here in the city.  
(20) I brought as a national program that  
(21) I basically, you know, started here in Trenton  
(22) a little less than a year ago.

(23) I want to initially thank the  
(24) Medicinal Marijuana Review Panel for giving  
(25) initial approval to 43 of the 45 petitions

(1) to expand the qualifying conditions for the  
(2) program. As a veteran's advocate, the  
(3) addition of anxiety, chronic pain, and  
(4) especially opioid use disorder is critical in  
(5) saving veterans' lives. As many of you know,  
(6) we're -- the statistics are a little shaky  
(7) but there's about 22 veterans every day that  
(8) are dying. These veterans are suffering.  
(9) The addition medical cannabis to this program  
(10) will help save a lot of lives and end their  
(11) suffering. Every day veterans are prescribed  
(12) dangerous and highly addictive pharmaceutical  
(13) drugs to treat service-related injuries  
(14) and illnesses in 2016 the VA treated  
(15) 66,000 vets for opioid addiction. The  
(16) addition of chronic pain and opiate disorder  
(17) in the New Jersey marijuana program will be  
(18) another tool in the tool box of  
(19) treating these patients. According to the  
(20) Department of Veteran Affairs the opiate  
(21) prescriptions increase for the VA patients by  
(22) nearly 77 percent. So that's my  
(23) recommendation. As someone that has a veteran  
(24) medical marijuana support group, I see how the  
(25) addition of VTSD has increased the livelihood

(1) of these veterans and also it just ends their  
(2) suffering. Medical marijuana helps to  
(3) refocus, you know, the depression. And it  
(4) helps, you know, get these -- get these  
(5) patients out of a funk.

(6) I would urge that the  
(7) Department of Health and the Commissioner to  
(8) please minimize the delay in adding these  
(9) recommendations. Delays cause needless  
(10) suffering and needless suffering causes  
(11) suicide. So if we could please, you know,  
(12) just do whatever we can to just -- you know,  
(13) to minimize these delays, it will save a lot  
(14) of people. So thank you.

(15) ALEX BEKKER, M.D., Ph.d: Thank  
(16) you. Just one more time I want to emphasize  
(17) that this panel has nothing to do with timing  
(18) of this legislature process. We just  
(19) recommend more people conditions in our role.  
(20) So you may address a very valid point but it's  
(21) not right to us.

(22) LAURA CARTER: Yes.

(23) ALEX BEKKER, M.D., Ph.D: We  
(24) have somebody else. We have more.

(25) So next would be Mr. George

(1) Scmidvorsky, Executive Director of  
(2) Compassionate Sciences.

(3) GEORGE SMIDVORSKY: Good morning,  
(4) Panel. We submitted something in writing, but  
(5) I, at the same time, I wanted to on behalf of  
(6) the patient-base in the current program,  
(7) there's probably 15,000 patients in the  
(8) program now. And Compassionate Sciences  
(9) services five thousand patients now in the  
(10) program, but I can only convey on their behalf  
(11) to urgently -- to recommend to Ms. Bennett to  
(12) approve these qualifying conditions as soon as  
(13) possible.

(14) ALEX BEKKER, M.D., Ph.d: Thank you  
(15) for your comments. And I think the last  
(16) comment is from Mr. Robert Kane. And he  
(17) represents CMMNJ.

(18) ROBERT KANE: Good morning. Robert  
(19) Kane, New Jersey Medical Marijuana Petition:  
(20) 013014028. I came up from Cape May County  
(21) this morning specifically to thank the members  
(22) for their volunteer mission for the medical  
(23) cannibus expansion. I've submitted in  
(24) writing as well a public study and verbal  
(25) comment. I would just like to -- I know you



(1) don't have anything to do with the speed of  
(2) implementing these conditions, but I would  
(3) like to implore commissioner Bennett to  
(4) institute as soon as possible.

(5) ALEX BEKKER, M.D., Ph.d: Thank you  
(6) for your comments, Mr. Kane. And I think we  
(7) don't have any more petitioners.

(8) (A discussion was held off the  
(9) record.)

(10) ALEX BEKKER, M.D., Ph.d: The  
(11) meeting will be adjourned in a few minutes.  
(12) We technically open to 11:00, but if there are  
(13) no comments there is no reason to waste  
(14) anybody's time. So we will wait right now for  
(15) a few minutes and see if there is late  
(16) arrivals -- things like that. And again, the  
(17) process, it's not our purview. This is kind  
(18) of different to address your concern to the  
(19) Department of Health. So I guess you can sit  
(20) in silence or whatever you'd like to do. Talk  
(21) amongst yourselves.

(22) (A recess was taken.)

(23) ALEX BEKKER, M.D., Ph.d: We have  
(24) another person who wants to present his case.  
(25) And this is Mr. Illiayd Smith, please.

(1) Hello.

(2) ILLIAYD SMITH: Hello. All right.  
(3) I'm here today on behalf of -- not myself --  
(4) but other family members and friends.

(5) One of my friends,  
(6) she has fancy limb syndrome. I think that's  
(7) what they call it. She had a tumor in her  
(8) knee and they had to amputate it. And she has  
(9) a lot of pain and stuff like that. She's not  
(10) on the -- um -- on the spectrum to receive  
(11) medical marijuana. She actually had it. My  
(12) daughter, she had very bad menstrual pains  
(13) when she has her period every month. And they  
(14) say that's not on the list either -- things  
(15) like that. I think it should be added to the  
(16) list for medical marijuana. That's it.

(17) ALEX BEKKER, M.D., Ph.D: You can  
(18) submit your comments in written form. It can  
(19) be considered like a new Petition. You can  
(20) say like for process, which starts with  
(21) Petitioner justification and things like that.  
(22) It's on the website. It's clearly delineated  
(23) all these steps.

(24) ILLIAYD SMITH: Okay. Okay. Thank  
(25) you.

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ALEX BEKKER, M.D., Ph.D: For five more minutes -- we will give a grace period for five minutes and then we will wrap it up.

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(Whereupon hearing concluded at 11:00 a.m.)

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C E R T I F I C A T E

I, ANGELA R. WATERS, CCR, DO HEREBY  
CERTIFY that the foregoing proceeding is a true and  
accurate transcript of my stenographic notes.

*Angela R. Waters*

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ANGELA R. WATERS, CCR, RPR