Utah Medical Cannabis Policy Advisory Board Utah Department of Health and Human Services Utah Department of Agriculture and Food

Multi-Agency State Office Building 195 North 1950 West Salt Lake City, Utah 84116

Re: Opposition to Medical Cannabis Card Renewals with a Pharmacist under Collaborative Practice Agreements.

## Ladies and Gentlemen:

We are in receipt of a notice that the Utah Medical Cannabis Policy Advisory Board will hear a proposal and vote on whether to pursue a statute and rule change to allow Pharmacists to renew a Utah medical cannabis recommendation under a Collaborative Practice Agreement with the responsible medical provider overseeing the patient's original recommendation.

We, a collective of healthcare professionals including physicians and advanced practice providers, wish to express our serious concerns and opposition regarding any proposed legislative changes that would allow pharmacists in Utah to renew medical cannabis recommendations under Collaborative Practice Agreements (CPAs) or otherwise.

Our opposition is grounded on critical issues related to regulatory compliance and potential conflicts of interest, which are detailed below:

- Patient Safety and Quality of Care: Pharmacists, while adept in medication
  management, do not typically possess the comprehensive clinical training required to
  assess the full spectrum of a patient's medical condition, which is critical in managing
  treatments involving controlled substances like cannabis. This shift could jeopardize
  patient safety and diminish the quality of care.
- 2. **Scope of Professional Practice**: The Utah Pharmacy Practice Act delineates the responsibilities and limitations within which pharmacists and other healthcare providers operate. Allowing pharmacists to renew medical cannabis recommendations blurs these boundaries and exceeds the traditional scope of pharmacy practice as outlined by state law (Utah Code Ann. §58-17b-601 et seq.).
- 3. Regulatory and Compliance Risks: According to the Controlled Substances Act of 1970, cannabis remains a Schedule I controlled substance at the federal level, prohibited from being prescribed, possessed, or distributed (21 U.S.C. §§ 841 and 856). While state laws may differ, the federal stance categorizes cannabis alongside drugs that have "no currently accepted medical use and a high potential for abuse." Permitting pharmacists to renew cannabis recommendations would place them in a precarious legal position, risking involvement in activities deemed illegal under federal law. This could expose pharmacists to liabilities including, but not limited to, aiding and abetting or conspiracy charges given their role in facilitating access to a federally controlled substance.

- 4. Potential for Misuse and Ethical Concerns: The proposed changes may lead to situations where the convenience of obtaining a renewal could overshadow thorough clinical evaluation, increasing the risk of misuse. The integrity of the Utah Medical Cannabis program is predicated on stringent evaluations by Qualified Medical Providers, a standard that may not be upheld if renewals are overly simplified and made broadly accessible through pharmacies.
- 5. **Conflicts of Interest:** The distinction between recommending and prescribing cannabis is crucial under federal law. Currently, healthcare providers may recommend cannabis but do not prescribe it, thus maintaining compliance with federal regulations. Allowing pharmacists, who may have affiliations with dispensaries, to renew cannabis recommendations blurs this line. It introduces a conflict of interest where pharmacists might prioritize dispensary affiliations or personal gain over unbiased medical judgment. This shift not only risks compromising the ethical standards of pharmacy practice but also challenges the integrity of patient care, potentially prioritizing commercial interests over patient health.

We are compelled to highlight that while the state of Utah has its regulatory framework for cannabis use, any adjustments to the scope of practice for pharmacists concerning controlled substances must be scrupulously considered against the backdrop of federal law. The proposal in question not only risks significant legal repercussions but also raises ethical concerns that could undermine the trust and safety patients place in healthcare providers.

In light of these considerations, we urge you to reject the proposal in question. It is crucial that any changes in the management and renewal of medical cannabis recommendations be approached with the utmost caution, ensuring full compliance with both state and federal laws, and maintaining the highest standards of healthcare delivery and patient safety.

We appreciate your attention to our concerns and remain available for further discussion at your convenience.

Sincerely,

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Pavid Gones (Apr 16, 2024 09:24 MDT)

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