Medical Cannabis Policy Advisory Board Meeting Minutes

Tuesday, September 15, 2:00 pm-5:00 pm

This meeting was held in person and virtually and was recorded. An audio copy of this recording can be found on the Utah Center for Medical Cannabis YouTube page: https://www.youtube.com/@UtahMedicalCannabis

Visit the board's website for more information on past meeting minutes and agendas (https://medicalcannabis.utah.gov/medical-cannabis-policy-advisory-board/).

Attendees

Board members attending: Kent Andersen, Nanette Berezhnyy, Cami Clark, CMHC, J. D. Lauritzen, Melissa Hinton, Blake Smith, and Misty Smith, PhD.

Absent: Anthony Griffiths

UDAF staff attending: Cody James, Brandon Forsyth, Desiree Hennessy, Veronica Goedhart, Trevor Eckhoff, Sara Lealos, Brenda Holt, and Jeremiah Sniffin

1. **Welcome**

Ms. Berezhnyy acknowledged that there was a quorum so the meeting could proceed at approximately 2:03 pm and read the introduction script.

2. **Approval of August 2026 minutes**

Ms. Berezhnyy asked the board if there were any proposed changes to the August 21, 2026 minutes. There were no changes proposed. Mr. Smith motioned to approve the August 2026 minutes and Dr. Smith seconded the motion. The board voted unanimously to approve the August 2026 minutes.

3. **Administrative business**

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For administrative business Ms. Berezhnyy mentioned that this was Mr. Eckhoff's last month as a designated staff support member for the board. They thanked him for his service. Ms. Berezhnyy then mentioned that there is a medical cannabis legislative working group meeting on October 19, 2026. Ms. Berezhnyy mentioned that she has been selected for the vacant position on the board of an individual representing an organization that advocates for medical cannabis patients. This means that the position of a member of the general public with a medical cannabis patient card is open. Applications for that position are open until August 25, 2026.

4. **UDAF updates**
    a. Dr. Forsyth did not have any updates. Mr. James provided updates on the new medical cannabis pharmacy applications closing and doing compliance checks. The specialized products authority licensing board is doing reviews by the end of the year. Mr. James gave a status update on administrative rules.
    b. Mr. Lauritzen had a question regarding issuing the 17th medical cannabis license regarding whether the applicant can't hold a production license or a medical cannabis license at all?
    c. Director Hennessy said that their advice would be to consult their attorney.
    d. Director Goedhart said that according to the statute they can't have a pharmacy license which is where the confusion lies. Other states don't classify them as pharmacies but dispensaries. The intent was for them to be completely independent.
    e. Mr. Smith asked a follow up question about public hearings.
    f. Mr. James said there would be a public hearing.
5. **Compassionate Use Board updates**
    a. Sara Lealos presented on the compassionate use board; Brenda Holt was available to answer questions as well.
    b. Mr. Anderson asked a question regarding common themes around petitions not going through.
    c. Ms. Lealos answered that the most common theme is RMP's not responding to the CUB. Another issue is people not having the documentation necessary for a successful CUB petition.
    d. Dr. Smith asked a question regarding a patient submitting an application with their own medical records.
    e. Ms. Lealos replied that a CUB petition always has to start with an RMP.
    f. Mr. Smith asked a question regarding how many RMP's are not providing the

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necessary information who are also their primary caregiver vs. ones who are designated RMP's for medical cannabis.

g. Ms. Lealos responded that they do not have those exact numbers but they would guess that it is rare for the primary care physician for the applicant to also be an RMP.
h. Mr. Smith asked a follow up question regarding if there is a discussion amongst the CUB about why there are not enough physicians recommending medical cannabis?
i. Ms. Lealos responded that no such discussion has taken place amongst the CUB but did take place amongst staff when they were part of DHHS.
j. Mr. Smith asked a follow up question regarding whether, according to survey results, that most medical providers are uncomfortable recommending medical cannabis to patients.
k. Ms. Lealos did not agree with "most."
l. Mr. Smith asked a follow up question regarding whether RMP's who are also medical care doctors are not participating in a way that would bring their patients to the CUB.
m. Ms. Holt said that in large part she would agree.
n. Mr. Smith commented about education amongst recommending medical providers and the CUB.
o. Dr. Giardino with the CUB mentioned his agreement that education about the program is crucial for medical practitioners. He stated that in his opinion the vast majority of medical practitioners don't know about medical cannabis because it wasn't part of their curriculum.
p. Dr. Alyx Williams, with the CUB, agreed with Dr. Giardino.
q. Mr. Smith commented about an education gap with medical cannabis education and accreditation organizations.
r. Ms. Lealos replied that a survey response was that physicians were uncomfortable with recommending medical cannabis due to a lack of education but were open to recommending the patient to an RMP.
s. Mr. Smith made a comment about this and excessive documentation. He also made a comment about patient access compared to traditional medicine.
t. Mr. Lauritzen asked a question about CUB members coming to the board with prior medical cannabis education.
u. Ms. Lealos said that at least three were RMP's.
v. Mr. Lauritzen made a comment about this and the discrepancy in education requirements for RMP's and CUB members.

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w. Ms. Lealos clarified that CUB members have to be an RMP before being on the board. So, they have the same education requirements. Three of the seven have extra certificates.
x. Dr. Whipple from the CUB made a comment about CUB members being highly qualified to be on the board and to his knowledge a vast amount of CUB applicants being approved.
y. Mr. Smith made a comment about his concern that a lot of applicants don't even meet the review process.
z. Ms. Lealos made a comment supporting the CUB. She presented the comments part of the presentation.
aa. Mr. Lauritzen asked how many in the comment slides were 18-21 years of age.
bb. Ms. Lealos and Ms. Holt said they were above 21.
cc. Mr. Smith made a comment about one of the comments in the presentation.
dd. Ms. Lealos did clarify that there is a question on the petition form whether the patient has taken cannabis in another state.
ee. Dr. Giardino with the CUB made a comment about the CUB application process being not onerous and compared the CUB petition to being similar to the approval process for other medical procedures.
ff. Mr. Smith responded to his comment and his concern about losing petitioners.
gg. Dr. Giardino responded that to him the CUB petition is not onerous and gives the physician an opportunity to fill it out.
hh. Ms. Lealos ended her presentation.
ii. Mr. Smith asked how the MCPAB can help in terms of education.
jj. Director Hennessy said that the board is looking into education opportunities. They are also looking at how petitions can get through the process faster and need doctor assistance with this. Perhaps this is how the MCPAB can help.
kk. Ms. Lealos recommended partnering more with the University of Utah in education opportunities.
ll. Dr. Smith recommended a change to the form as a useful data point for those patients who have not been approved and the rationale.
mm. Ms. Lealos said there is a similar question and planning on doing a survey with RMP's who are dropping out of the program.
nn. Mr. Smith made a comment about the attrition rate. He asked the SPALB about who is available to interpret the law.

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oo. Mr. Lealos responded that the SPALB has an AAG who assists them with appeals.
pp. Mr. Smith made a comment about CUB petition appeals.
qq. Director Hennessy commented that the SPALB is new and so is the appeal process.
rr. Mr. Smith made a comment about how this appeal process will work.
ss. Director Hennessy responded that they are hoping the SPALB appeal process is a catchall.
tt. Ms. Lealos said that the CUB looks at the application; the SPALB looks at if the review was a fair process.
uu. Dr. Smith made a recommendation that it may be a useful poll to create in the future for the operating schools of medicine, two osteopathic and one m.d program to ask what the curriculum is surrounding medical cannabis. Dr. Smith said it should be an easy question to ask from the SPALB and could be extended to other care providers like college of pharmacy.
vv. Mr. Eckhoff made a comment as a private citizen and not as an employee or representative of UDAF. Mr. Eckhoff's comment was about his past research through statute changes on completing terminology and petitions. His reading of the statute at times raised the question of abandoning a CUB petition application as a form of patient abandonment as a sort of professional malpractice under the Utah malpractice act. There is an argument there that a CUB application not going through, and potential action taken against them, may scare providers from submitting an application.
ww. Cassandra Finch, a physicians assistant with ripple effects wellness, made a public comment about her CUB application experiences from a provider perspective.
xx. Sarah Stevens, a member of the general public, made a public comment about education and a video library.
yy. Dr. Smith responded that there are education videos publicly available on the Center for Medical Cannabis website.
zz. Mr. Smith asked a question about condition criteria and autism.
aaa. Ms. Lealos responded that there is a consent calendar that is presented to the CUB if they meet the criteria.
bbb. Mr. Smith asked if those checklists are condition specific?
    i. Ms. Lealos said yes.
ccc. Mr. Smith said he is concerned about different conditions and criteria.

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ddd. Ms. Lealos responded to Ms. Finch's public comment and provided their account of what Ms. Finch stated regarding their CUB applications.

eee. Ms. Holt made a comment about the case discussed in Ms. Finch's public comment and psychiatric care.

fff. Ms. Berezhnyy made a comment about the CUB application mentioned by Ms. Finch and completeness.

ggg. Mr. Smith made a comment about criteria and data collection.

hhh. Dr. Hinton asked a question about the CUB petition appeal from the case mentioned by Ms. Finch and if the CUB reached out to the applicant about the appeal.

i. Ms. Lealos said yes.

iii. Dr. Smith made a comment about the pain criteria and the case mentioned by Ms. Finch.

jjj. Mr. Smith made a comment about gathering data and the qualitative side of it.

kkk. Dr. Smith said that she is cautious about the pain criteria and how it's evaluated.

lll. Dr. Whipple with the CUB made a comment that a lot of questions are answered in the CUB application and that he supports the appeal process.

mmm. Tanisha, a member of the general public, made a public comment about her CUB experience.

nnn. Mr. Smith made a comment about statute saying a CUB applicant must go through conventional treatments first before submitting a CUB application and cannabinoid therapies.

ooo. Dr. Smith made a comment about responsiveness and dosage forms.

ppp. Ms. Berezhnyy made a comment about dosage forms.

6. **Committee updates** –

The board provided updates from its committees.:

- Patient Access Committee:
    - Ms. Clark and Dr. Hinton gave an update. The update was about the committee receiving a record of complaints about the program and survey data. Ms. Clark brought up the RMP response rate and how to overcome that.
- Industry Committee:

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    - Mr. Smith gave an update about industry reporting and top priorities and having good participation. They are preparing a policy presentation and industry priorities in the October MCPAB meeting.
- Research & Education Committee:
    - The committee has not met this month. They plan on looking into RMP education and any road blocks.
- Policy & Rules Committee:
    - The committee did not meet because there were not enough members.
        - Mr. Smith commented about the urgency to fill the committee because there are industry policy recommendations coming.
        - Mr. Smith made a comment about getting interest from members of the general public participating in a subcommittee.

7. Medical cannabis card default length

a. Ms. Berezhnyy opened up the topic to the board for discussion. There was a proposal to change the card default length from two years to five years.
b. Mr. Smith shared several thoughts regarding medical cannabis card default lengths: leaving card duration to recommending providers, extending lengths for intractable or incurable conditions, and differentiating between minors and adults.
c. Ms. Clark mentioned that she believes PTSD needs also be an exception.
d. Mr. Smith made a comment about the review process.
e. Mr. Henderson made a comment about default card length.
f. Mr. Lauritzen made a comment about default card length, guardrails and cannabis safety.
g. Mr. Smith asked a question about how the default card length could be changed and whether this was in rule or statute.
    i. Mr. Lauritzen clarified that the statute would have to change.
h. Ms. Berezhnyy made a comment about existing guardrails.
i. Dr. Hinton mentioned that in her experience providers are concerned about the other providers running a click and prescribe operation. Dr. Hinton made a comment about card length guardrails and in person visits.
j. Rob Morris with Beehive pharmacy made a public comment about controlled substances with the state and federal government and default card lengths.
    i. Dr. Hinton and Ms. Berezhnyy responded to this comment.
k. Cassandra Finch with ripple effects wellness made a public comment about default card lengths.

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l. Director Hennessy made a comment about a patient no longer being a patient of an RMP, and no longer being a patient, and their card being cancelled.
    i. Ms. Berezhnyy responded to her comment.
    ii. Director Hennessy responded to her comment.
m. Mr. Smith asked a question about whether the MCPAB wants to move this agenda item to the policy board.
    i. Mr. Lauritzen answered this question and how the governance process works.

8. Next meeting's agenda

a. The industry committee may bring a policy presentation.
b. Mr. Smith asked a clarifying question and the urgency of the MCPAB making policy changes to the legislature.

9. Adjourn

Dr. Smith motioned to adjourn the meeting. Mr. Smith seconded the motion. The meeting adjourned at approximately 4:03 pm.

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