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Senate Legislative Record
One Hundred and Twenty-Seventh Legislature

State of Maine

Daily Edition

First Regular Session
beginning December 3, 2014

beginning at Page 1

Committee Amendment "A" (H-207) as Amended by Senate Amendment "A" (S-148) thereto, **ADOPTED**, in **NON-CONCURRENCE**.

Under suspension of the Rules, **READ A SECOND TIME** and **PASSED TO BE ENGROSSED AS AMENDED BY COMMITTEE AMENDMENT "A" (H-207) AS AMENDED BY SENATE AMENDMENT "A" (S-148)** thereto, in **NON-CONCURRENCE**.

Sent down for concurrence.

The Chair laid before the Senate the following Tabled and Later Assigned (5/29/15) matter:

HOUSE REPORTS - from the Committee on **HEALTH AND HUMAN SERVICES** on Bill "An Act To Remove from the Maine Medical Use of Marijuana Act the Requirement That a Patient's Medical Condition Be Debilitating"

H.P. 22 L.D. 23

Majority - **Ought to Pass** (12 members)

Minority - **Ought Not to Pass** (1 member)

Tabled - May 29, 2015, by Senator **BRAKEY** of Androscoggin

Pending - motion by same Senator to **ACCEPT** the Majority **OUGHT TO PASS** Report, in concurrence

(In House, May 28, 2015, the Majority **OUGHT TO PASS** Report **READ** and **ACCEPTED** and the Bill **PASSED TO BE ENGROSSED**.)

(In Senate, May 29, 2015, Reports **READ**.)

On motion by Senator **BRAKEY** of Androscoggin, supported by a Division of one-fifth of the members present and voting, a Roll Call was ordered.

THE PRESIDENT PRO TEMPORE: The Chair recognizes the Senator from Androscoggin, Senator Brakey.

Senator **BRAKEY:** Thank you, Mr. President. I rise today in support of the Ought to Pass motion on L.D. 23 and I hope this Body will join me on this issue. As Chairman for the Health and Human Services Committee, I'm proud to report that we arrived at a strong, bi-partisan, report on this legislation with 12 Republicans and Democrats signing on to the Ought to Pass Report. Under current law, the Legislature or DHHS must approve the use of medical cannabis for any new condition before it can be recommended by a medical provider to a patient. L.D. 23 removes the State's role in preapproving conditions and allows that decision to be made by the medical community. The Department of Health and Human Services testified in support of this legislation. Ken Albert, Direct and Chief Operating Officer of the Maine CDC, stated, "The Department welcomes this opportunity to remove itself from the medical provider/patient relationship." There are certain conditions for which medical cannabis is not currently allowed under state law, but for which medical cannabis could have significant health benefits for some

patients, as some doctors believe. These conditions include Tourette Syndrome, Parkinson's Disease, obsessive/compulsive disorder, anorexia nervosa, neuropathy, autism spectrum disorder, sickle cell disease, decompensated cirrhosis, traumatic brain injury, and osteoarthritis, among others. If L.D. 23 is rejected patients with these conditions will continue to be prohibited from getting the care they need. This legislation restores the doctor/patient relationship by allowing doctors to make appropriate decisions about whether medical marijuana is a recommended treatment for their patient's condition. Mr. President, I invite the Body to join with me and the Department of Health and Human Services in supporting this commonsense bill and please follow my light on the Ought to Pass motion. Thank you very much.

THE PRESIDENT PRO TEMPORE: The Chair recognizes the Senator from Cumberland, Senator Haskell.

Senator **HASKELL:** Thank you very much, Mr. President. Ladies and gentlemen of the Senate, I want to reiterate or reaffirm the Department's position here. Medical marijuana has been the law in the state of Maine for quite a while and the Department of Health and Human Services has done a very good job of being measured, careful, and professional in their approach to how they control and manage this program. If I were to add anything at all to Senator Brakey's comments I would simply continue that what the Department said is that they do not want to erode or make meaningless a cornerstone of the program, and that is the treatment of medical conditions that require the certification of a medical provider. Thank you.

THE PRESIDENT PRO TEMPORE: The Chair recognizes the Senator from Penobscot, Senator Gratwick.

Senator **GRATWICK:** Thank you, Mr. President. Ladies and gentlemen, I rise in major opposition to L.D. 23. I think this is an ill-considered, very poor bill and, alas, I do disagree with my good colleague from Androscoggin. This is not a good, commonsense bill. This is a nonsense bill. This bill makes no sense whatsoever. Specifically, we need to have rules and regulations about the medicines that are prescribed by healthcare providers, specifically when you go to your healthcare provider you want to know that the medicines you've been given have been used and looked at by the FDA, the Federal Drug Administration, which does good, controlled trials, or has stood up to standards in the medical literature, that is controlled data and controlled trials. You do not want your doctor to go pick a medicine off the shelf and say, "Well, this looks like a good medicine for today. Let's try it. It's a pretty pink elixir." This is going back to the 17th Century. This is putting medicine back a long way. The Federal Drug Administration exists for a very good reason. You have to remember that all medicines have the potential of benefit, presumably, but they also have the potential of harm. You really need to know what those are and it's really important that a prescribing physician or provider knows the therapeutic indications, potential side effects, the drug interactions. These are all essential things when you go to your healthcare provider. I think medicine should be given for specific indications only. One of the great sadness's of our life is that marijuana is a Title 1 drug and has not been well studied. That's because of a political decision in Washington. Nothing we can do anything about right here now. If we're going to use it, and you want to have a certain

assurance, it does need to have the laws in Washington changed and I think that's not going to occur for some time. In the meantime, we should not be just expanding the indication for medication because, "I said so." I'm a licensed physician and because I said so. I may be right, but, most assuredly, I can be wrong as well. One indication just mentioned for marijuana is osteoarthritis. It turns out I find that particularly irritating because that's the field that I deal with and there is no published literature whatsoever. Zero. No literature whatsoever to pull that out of the hat. Of course, it may make people feel better if they get the THC and they relax, but that's not the issue here. We should not be going down this particular way. I would strongly urge people to vote against this. I think we need a limited number of indications for any medicine and those should be decided by the FDA, working in concert with controlled data and controlled clinical trials. Thank you, Mr. President.

THE PRESIDENT PRO TEMPORE: The Chair recognizes the Senator from Kennebec, Senator Cyrway.

Senator **CYRWAY:** Thank you, Mr. President. Ladies and gentlemen of the Senate, I want to commend Senator Gratwick for the great speech he just gave. This is a nonsense bill. I can't imagine putting DHHS and marijuana in the same sentence. This is ridiculous. It makes me sick to my stomach to think that marijuana has gotten so important that we put that ahead of our children and our lives and our safety. Proponents of this legislation have argued that marijuana is less addictive, less harmful than alcohol. I find this argument irrelevant. This legislation has nothing to do with alcohol. To say that one substance should become legal simply because another already is is ridiculous. The fact of the matter is marijuana is a dangerous substance. We, as members of the Maine State Senate, should not take steps that encourage the use of this harmful drug. The popularity of this particular concern is that it enables and causes, or produces, a high. That's basically what everybody's looking for. As a result, many times people consume more in order to feel the effects faster, which can lead to disastrous results.

According to the National Institute of Health, marijuana has both short-term and long-term effects on the brain. In the short-term, side effects include altered senses, altered sense of time, changes in mood, impaired body movement, difficulty with thinking and problem solving, and impaired memory. In the long-term, marijuana affects brain development, which is especially harmful to young people whose brains are still developing. One study found that people who started smoking marijuana heavily in their teens, and had an ongoing cannabis use disorder, lost an average of 8 I.Q. points between ages 13 and 38. Long-term use has also been linked to mental illness, such as temporary hallucinations and temporary paranoia and anxiety, depression, and suicidal thoughts. Marijuana doesn't just affect the brain. It can cause breathing problems, increased heartrate which increases the chance of heart attacks, and problems with child development during and after pregnancy.

Finally, according to the NIH, when compared to non-users, heavy marijuana users reported lower life satisfaction, poor mental health, poor physical health, more relationship problems, and less academic and career success. Does that sound like the type of life we want for our Maine people? Dr. Gratwick was right. This is the man by the wagon wheel selling his elixir drug in the Old West. This is the cure-all. Is that the cure-all we want? We need a medical doctor in the house and not the caregiver.

I hope the state of Maine can see just what is happening to our state right here and now. It is beyond my imagination how bad we can make things. This is just beyond what I can imagine. Open your eyes, ladies and gentlemen. This is where the paint hits the road. I will tell you right now you are setting the stage for the state of Maine for failure. I listened to these bills and suggested that these we kill because this is California and "Colorweedo" working on us right now. I say "Colorweedo" not Colorado. It is really getting out of control. I can't imagine how much money has been put into these bills right here today, trying to get these approved. I beg all of you to think hard when you push that button because this is what you're setting the stage for the rest of our lives. This is going to be a very important time. I can't stress enough, from law enforcement, how much I've fought to stop drug abuse and all we do is take these and just pass them. This is ridiculous. This is the time to be an adult and think about our children. What are we doing? It's not just about us, we're thinking about what they're going to be having to deal with. We don't want people breaking into our houses, getting into harsher and harder drugs because this is approved, and weakening our society as far as our crimes. What are we doing to this state? We're going to have a loose cannon here. We are basically wielding a gun loosely and just putting pot out there in our society carelessly. It's time we take a stand and stop marijuana. Stop it now. I beg of you, really think hard and fast and push that button against marijuana. Thank you, Mr. President.

THE PRESIDENT PRO TEMPORE: The Chair recognizes the Senator from Knox, Senator Miramant.

Senator **MIRAMANT:** Thank you, Mr. President. Men and women of the Senate, wonderful thoughts from some wonderful and caring men on both sides of me here and, since most of our science is anecdotal about marijuana because the policy was formed on the basis of a Hollywood movie that had someone smoke pot and murder someone, it's not hard to see the confusion. It's not hard to see that the only country that's allowed some research is a scientist in Israel who has discovered in his 86 years, I believe, you can fact check that in this month's National Geographic, so many cannabinoids that he tries to name them for all the uses that he's found for benefit to the body that he wished he had another lifetime just to do more research on marijuana. He thinks it's going to have so many benefits. We passed the hemp bill, which has so many medical benefits. It has the ability to grow without pesticides and herbicides and fertilizers and build up the soil while creating healthy oils that we need, that we get from fish and others but in a great quantity. It has so many health benefits. People are finding, as my colleague, Senator Brakey, had talked about, proof. The only way you can get proof from using this is by doing it. My Senator neighbor, Senator Gratwick, makes some great points about his business, but if you think about his business, he says that there might be some things about marijuana that we don't know. The way that medicine has gone it has taken things about many of these medications that we do know. Since they allow advertising of them, you can now read about them. If you want to read about this botox, now it's for helping psoriasis because they need to make more money with it. That's all. When they didn't have enough ways to treat kids with ADHD, which for the most part are males with a lot of energy, instead of sending out to the playground, they drug them. We ran out of drugs. We started

treating them with antidepressants known to cause suicide. No problem, got away with that. Anecdotally, all the science we have. At my bar, the people that came in and got drunk and beat each other up, broke up my furniture, I had to call the police. Nothing but problems. They went home, they came in and cashed their mill checks and spent it all on alcohol. The "pot" had sat in the corner, listened to music, and thanked me for a great place to come and sit down. Anecdotally, they were calm and peaceful and they're still happy today. The MDs, the dentists, the professionals that are doing every job around you and smoke it appropriately, or eat it or whatever they do appropriately. It's growing all around us while we waste our tax dollars sending out the National Guard, wasting fuel to go find small patches of marijuana, and call that justice or reasonable law enforcement. Let's take it out of there. Let's take our kids out of going to places to find pot, which they might try or might not. We might give them a pass on making them a felon over it. Let's take them out of the places they have to go get it, where they are also selling coke and meth and everything else. The guy says, "Here, try this now." If it was legal they might get a taste of it, but, boy, we're going to try and keep them from doing it like we do with alcohol. Make it age appropriate, keep it out of their hands, and keep them out of the hands of the people that sell drugs that are harmful to all of us and push to go out and do other things that create really bad crimes. There are many reasons, and your reasons and you're caring, and I know you all care about the people of this state. I know you well now to know that. I want you to know that when people disagree with you it's not because they haven't thought this through. I wish we had more science so we could be on it. There is science that's beginning to come into place, but I'm glad to talk about the anecdotal parts of it anytime.

THE PRESIDENT PRO TEMPORE: The Chair recognizes the Senator from Kennebec, Senator McCormick.

Senator **MCCORMICK:** Thank you, Mr. President. Ladies and gentlemen of the Senate, I rise in opposition to the pending motion. As we heard, this was a 12-1 report out of committee and I was the one. I agree with a lot of the comments from the good Senator from Penobscot, Senator Gratwick. For those of us who were here when we implemented this medical marijuana act, some of the reasons why some of us supported that was because it was restricted to debilitating medical conditions. There was some control, initially, on where it's going to be administered and who to. Some of the debilitating conditions included cancer, glaucoma, hepatitis C, conditions that produce intractable pain, seizures, nausea, post-traumatic stress disorder; conditions that there was some evidence at that time that responded to medical marijuana. Many of us felt fairly comfortable in passing this legislation. At this point, so soon after enacting this law, to eliminate all of the conditions and make it strictly on my conversation with the doctor on what I may or may not experience for conditions, I think, is too soon. I'll be opposing the pending motion. Thank you, Mr. President.

THE PRESIDENT PRO TEMPORE: The Chair recognizes the Senator from Oxford, Senator Patrick.

Senator **PATRICK:** Thank you, Mr. President. Ladies and gentlemen of the Senate, colleagues and friends, I rise in support of the motion. I know I'm not a doctor and I very rarely debate my good colleague from Penobscot, Senator Gratwick, on the merits

of anything, but there is one thing that I know, as an adult, and that I take seriously; what are some of the major scourges in American society today? Vicodin, Percocet, Oxycodone. Almost every week on TV you hear of people breaking into drug stores, going after one of the most addictive drugs known to man. Why do I support this issue? I was one of the ones who actually supported the original medical marijuana legislation and I agree with the good Senator McCormick that I, too, liked it because it was narrowly focused. Since then I have seen many times throughout the last six or seven years where people that I know were affected physically, mentally, and emotionally. Their marriages were devastated, that their bodies were ravaged, that there were many things that I was wondering if these people were suicidal because they had nothing to live for. I'd see them a month or two later on down the road and the next thing I'd know I'd say, "What are you doing? My goodness, for the last two or three years I thought you was on your way out. You lost your marriage. You lost your house. You lost everything." Medical marijuana. I said, "What are you talking about?" I found out one that's fantastic for pain. I found out one that's good for sleep. Others said they found it for this or they found it for that. I'm saying to myself, "My goodness gracious." Originally, when we used to talk about marijuana, it was the scourge of the world. You're looking at it now and we're discussing medical marijuana. I'm not saying legalize marijuana, and maybe down the road people will want to do that, but to expand the uses of medical marijuana, to allow a medical practitioner to have that ability, to me, makes commonsense. Not for everything, but if I'm going to see a doctor and he understands my physical conditions, emotional or mental or whatever it may be, and if he believes there's something there that's going to help me without having the addictive properties that Vicodin, Percocet, Oxycodone, and all the legalized prescription drugs, I'm in favor of that. I could have been in favor of maybe expanding them a lot more, but that's not before us. If this is going to pass, I can live with my doctor making that decision. I might not always agree with all medical doctors and medical boards and dental boards, but I do believe in the ability that my doctor has to do the prescribing that's going to help any patient. I would ask you to support the pending motion. Thank you, Mr. President.

THE PRESIDENT PRO TEMPORE: The Chair recognizes the Senator from Cumberland, Senator Haskell.

Senator **HASKELL:** Thank you very much, Mr. President. Ladies and gentlemen of the Senate, I want to talk about a couple of things. Number one is, I think you need to make sure that we don't use the word "prescribe" when it comes to this. This is certification that the physician provides. It's a certification. I'm fairly familiar with it since I was the author of the very first medical marijuana bill in 1992 that passed the House and the Senate because of the experience of my daughter when she was seriously ill, during a pregnancy, with ovarian invasive cancer. Had a prematurely born child and probably one of the most invasive kinds of chemotherapy that you can imagine on her body. I can tell you she did not get high from marijuana. What happened when she was able to access small amounts of marijuana was she was able to keep down a little bit of juice or a little bit of water. After you've had a 25 pound tumor removed from your gut and you've now gone through five months of chemotherapy, I'm going to tell you, being able to keep a little water or a little juice down doesn't have anything to do with

getting high. This program is in place to provide medical marijuana and we're not talking here about whether or not we're going to do recreational marijuana. We're talking about medical marijuana. I can speak to that from personal experience for a long time. When the program was first set up, and I sat on each one of the task forces and each one of the groups, it was determined that we should begin carefully and this program has begun carefully. That's why there was a limitation. There was also a board put in place in order to add additional conditions. That board only made recommendations to the Legislature. It is the Legislature that has added the one condition that's been added since the beginning; that's PTSD that has been added to the list. I do not believe that the Legislature is the appropriate entity to be making decisions. I believe that is for the medical professionals, those medical professionals who have experience with the use of medical marijuana, and that's why I support this bill, because it removes the decision about which ones would be good and which ones would be bad from this Body and moves it over to the medical professionals, where it belongs. Thank you.

THE PRESIDENT PRO TEMPORE: The Chair recognizes the Senator from Aroostook, Senator Edgecomb.

Senator **EDGEComb**: Thank you, Mr. President. Ladies and gentlemen of the Senate, on all of these marijuana bill I'll only get up to speak once because I'm generally opposed to marijuana and I think we are moving too fast in a direction to do that. In each of these bills, each time we discuss marijuana, it opens the gate a little bit wider and pretty soon the cows will be out eating grass wherever they may roam. I think I will leave it with you that I'm only going to ask you one question and then I want you to answer. It is not a question I'm posing through the Chair. Do we really want to employ teachers, airplane pilots, truck drivers, ambulance operators, doctors, drill sergeants, and coaches who smoke or ingest marijuana? Thank you.

THE PRESIDENT PRO TEMPORE: The Chair recognizes the Senator from Penobscot, Senator Cushing.

Senator **CUSHING**: Thank you, Mr. President. Colleagues of the Senate, I rise today in opposition to the pending motion. I respect that this is an emotional issue for many people, both in this Chamber and in this state. There is a change that has taken place in the attitude towards this drug. The concern I have, personally, is that as we venture forth in changing our policies as policy makers for this state and its people I wonder if we're reflecting appropriately on the impact that we are having by not first taking care to have the parameters, the appropriate testing, in place, and the means to identify, in conduct with the medical community, what the results may be. As we find with many other drugs that are FDA approved, there are numerous tests, sometimes over long years, to identify what the cause and effect may be on certain ages, certain conditions, or certain body types of the medications. Those medications are also fairly tightly controlled, Mr. President. The potency of those is regulated. There is a chain of custody that only allows the delivery of those through certain means. I'm concerned, Mr. President, that we have a deep divide within our medical profession about the use of this substance. We're exposing our state and its people to risks before we make the appropriate safeguards available. As some of my colleagues alluded to, they supported this. They have given this the opportunity to be rolled out in our state. It's here

now. It's not a question of whether it should be legal or not legal on the state level. We have de facto accepted the ability of citizens of our state to make use of this, and I hope that some of those who are making use of it are doing it in a manner that is relieving suffering and pain in their lives, that it's helping them to lead a more normal life. I can't speak to all of the effects of that or the individuals because I'm not privy to that information. I do ask us to reflect upon whether this is the right time and the right place and if we have properly prepared the safeguards that we are entrusted with working on before we pass this type of major change to a law that still is evolving. Thank you for your time and your consideration.

THE PRESIDENT PRO TEMPORE: The Chair recognizes the Senator from Washington, Senator Burns.

Senator **BURNS**: Thank you, Mr. President. Ladies and gentlemen of the Senate, I appreciate the debate that I've been listening to and I realize that it's awful easy to stray off course and get away from the issue that's at hand here. I think it's really difficult to speak to some of these issues without expressing where your philosophy and your beliefs are coming from. As we've just heard, we are in the early stages of the law of the land for the state of Maine. That's the proper use of medical marijuana. I have many constituents, as do you, in my area who are engaged in this enterprise. They apparently trust me, even though I'm noted to be somewhat conservative, because they come and talk to me. One thing they've implored me to do before I came down here for this session was to make sure that we didn't loosen regulations but that we tightened regulations on the proper use and dispensing of medical marijuana because they have seen, according to them anecdotally from the inside, abuses and misuses, inappropriate handling of what we have entrusted to many entities across the state to grow and dispense and help people that say they need the services of marijuana to off-set the ramifications of their diseases. I don't necessarily accept that whole philosophy, but, again, it's the law. Other people do accept it. Other people can testify anecdotally how it's necessary. I've accepted that, but I also accept the need to be very careful in how we regulate or deregulate.

You heard a lot of passion here about this and you hear people talking about many different aspects that maybe aren't exactly germane to what's up on the board behind the President, but you have to understand that some people have dealt with this for many years. This isn't new. This is something that some people have dealt with through their professions for decades. They've seen some of the abuses and the misuses. Some of those in the room who deal with emergency medical services see things the rest of us don't see. They see some of the human carnage that takes place. It's hard for us to have a perspective, it's hard for us to see that through their eyes unless you're actually there and you see that carnage. I've seen the carnage. Ladies and gentlemen, I've seen a lot of the carnage. I can't think of a particular addict that I've interviewed, or a dealer that I've interviewed, that didn't start out with marijuana. I've seen those that use just marijuana. They aren't able to keep a vehicle in a two lane highway because they're under the influence of it. I know that doesn't have to do with what's on the board, but that's where my philosophy springs from. I've seen a lot of innocent pot users who bought their supply from people that weren't nice people. They weren't nice people at all. In fact, they were in it for the money and they would do anything necessary in order to

get that money. They prey on people who think that they need this substance to get by in life.

I think people choose to believe what they already know and already believe and want to support their philosophy. When it comes to science, I think there are an awful lot of people who are ignoring the science that's coming out every day as far as the effects and the impact that this particular substance is having, and will have, on our young people. You can choose not to accept that, that's your choice, but we, as a state, I hope, would be wiser. I think we would do well to slow down, to pay attention to the science, to see what's happening in other places or other states, rather than to open the floodgates, because I think that's what we're on the precipice of doing, opening the floodgates. I agree with one of the statements that was made here a few minutes ago. Once it's opened it's pretty hard to shut it. You can't turn it back. These are my children and my grandchildren, as well as yours, that we're talking about. I'm going to vote probably fairly consistently with all these that come along because of my philosophy, because of my experience, because of what I've seen, and because of what I've been learning in the last couple of years from what's been going on in other states, and I'm hoping that we don't go down that same path here in the state of Maine, but I'm fearing what I'm seeing this term, this session, is an indication that we're trying to. I hope we're not. I would implore you, as has already been said, to think hard about all of the issues that we're facing here this afternoon and who we represent, who we're responsible to, who is depending upon us. We've already set, in my opinion, a very poor example for our young people with the way we abuse alcohol; not the way we use it, but the way we abuse alcohol in this state. Why do we want to go down the same avenue and give the message to them that there's another substance that they can use because we like it and we support it. Good luck with it. I always think of the adage, "Fools rush in where angels fear to tread." Thank you.

THE PRESIDENT PRO TEMPORE: The Chair recognizes the Senator from Penobscot, Senator Gratwick.

Senator **GRATWICK:** Thank you very much, Mr. President. Ladies and gentlemen, just very briefly. From my point of view, it is a very important part of medical care, because this is under the guise of medical care, is a principle that medicine should be evidence-based these days. It's a very important thing to remember; evidence-based. You do not want to go to a provider and say, "Well, I think this is good. I read this in Lady's Home Journal." That's bad. It has to be evidence-based and that implies that there's data, control trials, placebo controlled trials. That's what you want medicine to be. Fifty or a hundred years ago there was very little about medicine. It was that way. We're moving better in that way and you really want now for you and in a hundred years you want it to be even better based on data. That's point one. Two, it seems to be that the anecdotal medicine is the medicine of the past because everybody knows that the placebo effect is 33%. I can give anybody anything here and 33% of you are going to get better. If that's the way you want to practice medicine fine, go head, but that should not be what we, as legislators, are doing here. If you come to me for pneumonia you want to know that you're having a medicine that's been shown to be effective. If you come for arthritis or whatever, if you come to me for a debilitating problem you want to know how I'm going to make up my mind what the right treatment is. How can I tell that this is a good treatment? Grape juice is great or this

medicine, phenylbutazone, is poor. How do you want me to know? I'm going to have to look at the medical literature and I'm going to have to examine that data in order to give you an appropriate opinion. Without research you simply cannot make that. I come back to the basic point, without research or without data, simply labeling it as "debilitating" disease does not allow you to make an accurate enough diagnosis. In one sense or another, I think we're really passing judgment on the integrity of the growing scientific basis of American medicine. It sure is not perfect these days, but it's better than it was 100 years ago. I very much hope it's going to be better 100 years from now. We need to have evidence-based not anecdotal. Thank you again, sir.

THE PRESIDENT PRO TEMPORE: The Chair recognizes the Senator from Androscoggin, Senator Brakey.

Senator **BRAKEY:** Thank you, Mr. President. I just rise to say I very much appreciate the comments of my colleague from Penobscot, Senator Gratwick. I just would like to echo some of the comments from the Senator from Knox, Senator Miramant, that it's very difficult to have evidence-based trials when the federal government has had the posture that it's had. We operate with the best evidence that we have. I'll say, going back to my constituent, Cyndimae Meehan, and seeing videos of her seizures and seeing the quick turnaround for her; knowing that she's gone from days having hundreds of seizures a day to, after being recommended by two doctors because that's what you need if you're a minor, you need two doctors to recommend it, days where she has no seizures a day. That's evidence for me. In the absence of, because of federal government policy, these clinical trials and everything we would ideally like to have, that's the evidence we have to go on. While I agree that there's a saying, "When you go to war you don't go to war with the Army that you want to have, you go to war with the Army that you have." The Army that we have is the data we have because the federal government has been standing in the way of doing the real evidence-based research on this. What we have is the cases of real people that we can see. Thank you very much.

THE PRESIDENT PRO TEMPORE: The pending question before the Senate is the motion by the Senator from Androscoggin, Senator Brakey to Accept the Majority Ought to Pass Report, in concurrence. A Roll Call has been ordered. Is the Senate ready for the question?

The Doorkeepers secured the Chamber.

The Secretary opened the vote.

ROLL CALL (#260)

YEAS: Senators: ALFOND, BRAKEY, BREEN, DIAMOND, DILL, DUTREMBLE, GERZOFSKY, HASKELL, JOHNSON, KATZ, LIBBY, MILLETT, MIRAMANT, PATRICK, VALENTINO, WILLETTE

NAYS: Senators: BAKER, BURNS, COLLINS, CUSHING, CYRWAY, DAVIS, EDGECOMB, GRATWICK, HAMPER, HILL, LANGLEY, MCCORMICK, ROSEN, SAVIELLO, THIBODEAU, VOLK, WHITTEMORE, WOODSOME, THE PRESIDENT PRO TEMPORE - GARRETT P. MASON

16 Senators having voted in the affirmative and 19 Senators having voted in the negative, the motion by Senator **BRAKEY** of Androscoggin to **ACCEPT** the Majority **OUGHT TO PASS** Report, in concurrence, **FAILED**.

The Minority **OUGHT NOT TO PASS** Report **ACCEPTED**, in **NON-CONCURRENCE**.

Sent down for concurrence.

Off Record Remarks

The Chair laid before the Senate the following Tabled and Later Assigned (6/11/15) matter:

An Act Regarding Patient Information Under the Maine Medical Use of Marijuana Act

H.P. 384 L.D. 560
(C "A" H-330)

Tabled - June 11, 2015, by Senator **CUSHING** of Penobscot

Pending - **ENACTMENT**, in concurrence

(In Senate, June 9, 2015, **PASSED TO BE ENGROSSED AS AMENDED BY COMMITTEE AMENDMENT "A" (H-330)**, in concurrence.)

(In House, June 10, 2015, **PASSED TO BE ENACTED**.)

On motion by Senator **CUSHING** of Penobscot, supported by a Division of one-fifth of the members present and voting, a Roll Call was ordered.

THE PRESIDENT PRO TEMPORE: The Chair recognizes the Senator from Androscoggin, Senator Brakey.

Senator **BRAKEY:** Thank you, Mr. President. I rise today in support of the Ought to Pass motion on L.D. 560, An Act Regarding Patient Information Under the Maine Medical Use of Marijuana Act. This bill received unanimous support from the Health and Human Services Committee after amending it with input from the department. The Health and Human Services Committee is made up, as you all know, 13 members, Republicans and Democrats, Conservatives, Liberals, and everything in between. Every member of that committee supported this bill. This bill prohibits DHHS from storing or retaining in electronic format or requiring healthcare providers to transmit over the internet personally identifying patient information related to the Maine Medical Use of Marijuana Act, including the name, address, and date of birth. This is a simple privacy issue.

As many can imagine, for a multitude of reasons, there is an understandable interest from many patients in maintaining their privacy, as would be the case in many medical records, but in this case especially so because of the posture with the federal government. DHHS has the technological capability to implement this. As we worked through this bill, as a committee, for many hours and over the course of several days we got to a place where everyone agreed to this and the department had no objection to the final version. Mr. President, I hope the Body will join me in passing this simple privacy protection for patients. Thank you very much.

THE PRESIDENT PRO TEMPORE: The Chair recognizes the Senator from Kennebec, Senator Cyrway.

Senator **CYRWAY:** Thank you, Mr. President. Ladies and gentlemen of the Senate, this is not a simple privacy issue. I think this is more of a complicated issue. I think this is more an issue of who is using marijuana. This is a cover up. I'm tired of hearing all these excuses of why we should use marijuana and how we can hide it and how we can get away with it and how we can pretend we're doctors and how we can pretend we're nurses and caregivers. This is important stuff and we have no evidence that this actually works. Now we're going to try to avoid from having privacy issues about marijuana. This is where it's all leading to, folks. We have to make a decision and we can't keep doing this and making our lives to the point where marijuana is going to control our society. Once you get a hold of the drug, it controls you. That's a simple fact on any drug. We're allowing it to happen to our state. I cannot believe, if we vote for this, that this is the way to go. I can't believe that even a person can consider this to be okay. Senator Gratwick said it right. This is nonsense. This is not a medication. It's not a medication that is proven. Thank you for listening and I hope you go against this bill. Thank you.

THE PRESIDENT PRO TEMPORE: The Chair recognizes the Senator from Cumberland, Senator Volk.

Senator **VOLK:** Thank you, Mr. President. I wish to pose a question through the Chair.

THE PRESIDENT PRO TEMPORE: The Senator may pose her question.

Senator **VOLK:** Thank you, Mr. President. In looking at the testimony that's posted on-line, the Department of Health and Human Services seemed to sort of be neither for nor against because the original version of this bill was a concept draft. I'm wondering whether or not this is something the department supports in its current form.

THE PRESIDENT PRO TEMPORE: The Senator from Cumberland, Senator Volk poses a question through the Chair to anyone who may wish to answer. The Chair recognizes the Senator from Androscoggin, Senator Brakey.

Senator **BRAKEY:** Thank you, Mr. President. We worked with the department. We spent several hours together working through this bill to get it to a place where the department and the committee was comfortable. The department, on the final version