DEPARTMENT OF HEALTH

Medical Cannabis Program Update

JULY 2017

Minnesota's medical cannabis program began distributing medical cannabis to registered patients on July 1, 2015. This update reports information collected from July 1, 2015 through June 30, 2017. The data for this update, unless otherwise noted, come from the medical cannabis patient registry system, a secure, web-based application system. This document is updated quarterly.

Cannabis Manufacturers

The Minnesota Department of Health (MDH) registered two medical cannabis manufacturers on December 1, 2014. They are responsible for the cultivation, production, and distribution of medical cannabis in the state. The manufacturers are Minnesota Medical Solutions, LLC and LeafLine Labs, LLC.

Minnesota Medical Solutions operates distribution facilities, or Cannabis Patient Centers (CPCs), in Minneapolis, Rochester, Moorhead, and Bloomington.

LeafLine Labs operates CPCs in Eagan, St. Cloud, Hibbing, and St. Paul.

Figure 1 displays the total number of patient visits to a CPC that resulted in medical cannabis purchases between July 1, 2015 and June 30, 2017. Each visit may have resulted in the purchase of multiple products and variable quantities; additionally patients may have made several purchase visits during this time period. Only the number of total CPC visits is reflected in this figure.

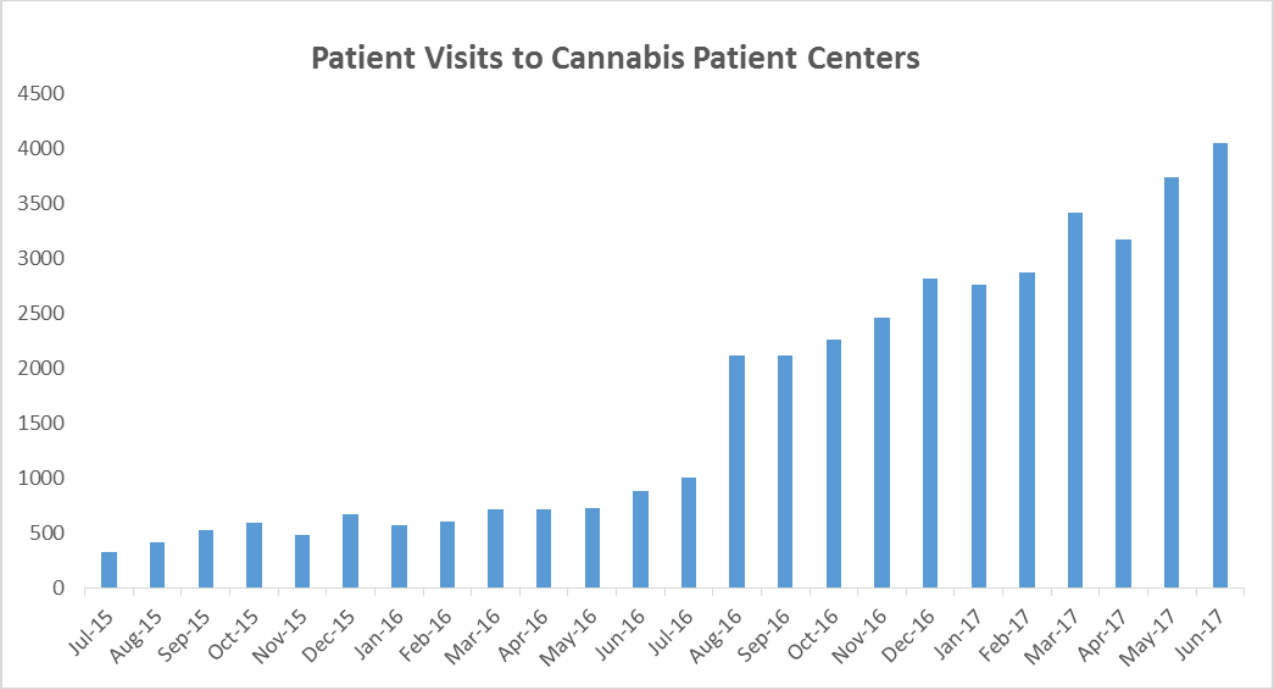

Figure 1. Total number of patient visits to a Cannabis Patient Center which resulted in purchase of medical cannabis products, by month.

Patients

Qualifying patients must be enrolled in the medical cannabis patient registry to be eligible to legally purchase and possess medical cannabis. As part of the application process, a patient's qualifying medical condition must be certified by a health care practitioner; this qualifying medical condition and the patient must be re-evaluated and re-certified by a health care practitioner every year.

Figure 2 displays the weekly number of patients enrolled and in active status in the registry. As of June 30, 2017, there were 6,184 patients actively enrolled in the patient registry, an increase of 1,047 from the 5,137 enrolled on March 31, 2017.

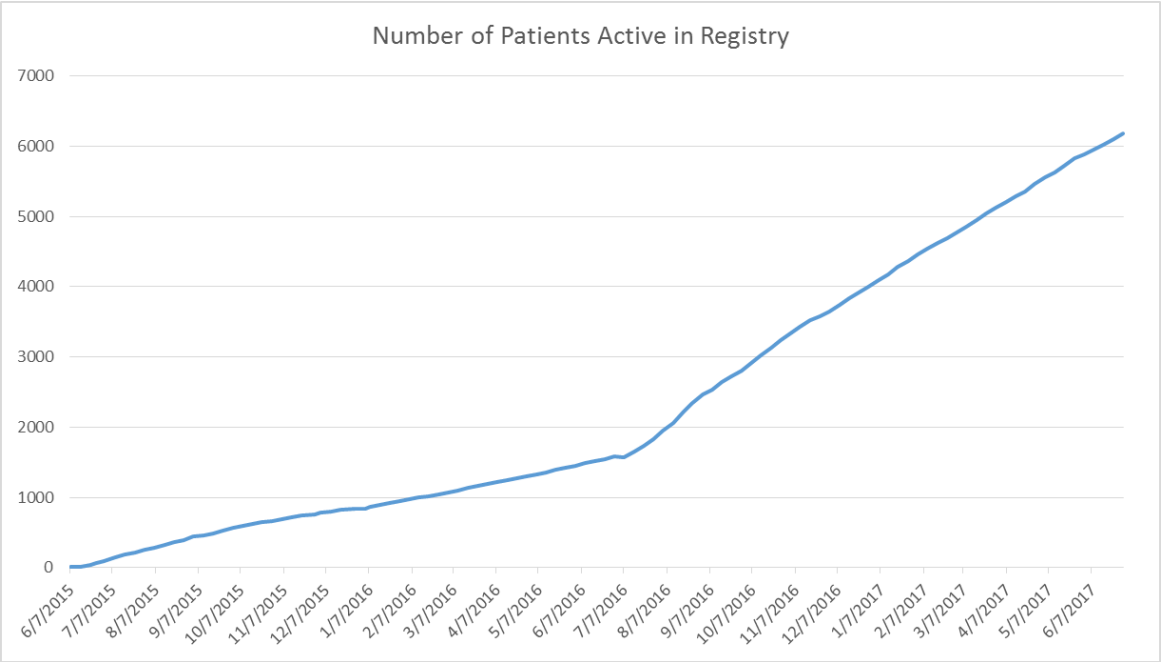

Figure 2. Weekly number of patients enrolled and in active status in registry.

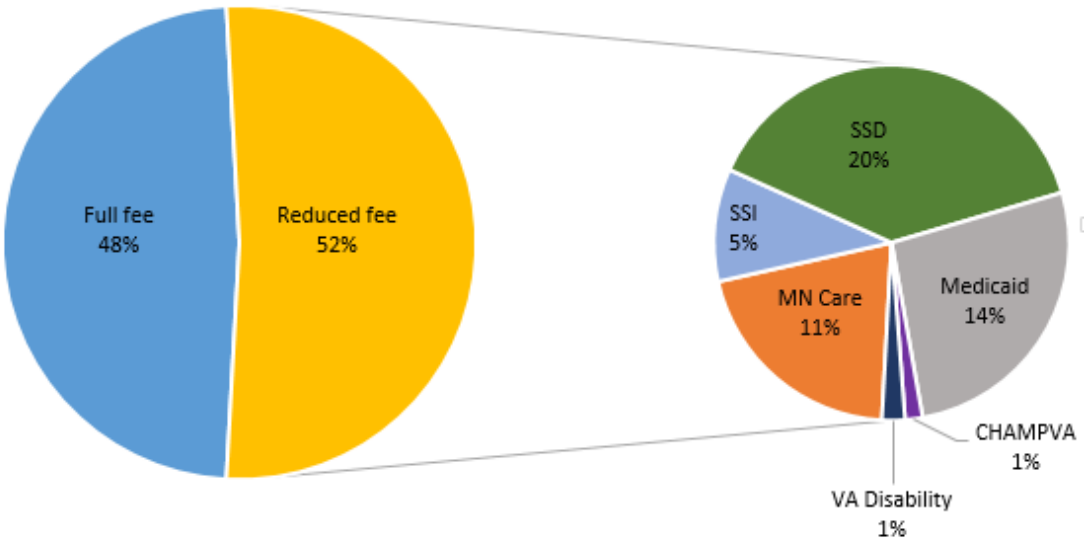

Figure 3. Breakdown of active patients by fee type (reduced vs. full fee) and types of government assistance for reduced fees.

Patients must pay an enrollment fee before they are eligible to legally purchase and possess medical cannabis. Minnesota Statutes section 152.35 sets the annual patient enrollment fee at $200; patients who receive government assistance, such as Minnesota Care (MN Care) , Social Security Disability (SSD), Supplemental Security Income (SSI), Medicaid/Medical Assistance

(MA) and CHAMPVA, qualify for a reduced fee of $50. Figure 3 shows that approximately 52 percent of registered patients have qualified for the reduced enrollment fee, down from the 57 percent qualifying for the lower fee as of December 31, 2016.

The racial/ethnic distribution of active patients in the registry reflects the state's demographics, as can be seen in Table 1.

Table 1: Active Patient Race and Ethnicity Compared to Overall State Demographics

Race/Ethnicity	Medical Cannabis Registry	2014 Census Bureau Estimates*
American Indian	161 (2.6%)	1.9%
Asian	70 (1.1%)	5.0%
Black	274 (4.4%)	6.5%
Hawaiian	6 (0.1%)	0.1%
White	5283 (85.4%)	87.5%
Hispanic	131 (2.1%)	4.9%
Other	96 (1.6%)	1.7%
Unknown	135 (2.2%)	

*http://factfinder.census.gov/faces/nav/jsf/pages/index.xhtml

The qualifying medical conditions are: Cancer or its treatment (must be accompanied by severe or chronic pain, nausea , or severe wasting); Glaucoma; HIV/AIDS; Tourette Syndrome; Amyotrophic Lateral Sclerosis (ALS or Lou Gehrig's Disease); Seizures, including those characteristic of epilepsy; Severe and persistent muscle spasms, including those characteristic of multiple sclerosis; Terminal Illness with life-expectancy of less than 1 year (must be accompanied by severe or chronic pain, nausea , or severe wasting); and, Crohn's Disease was extended to Inflammatory Bowel Disease (including Crohn's Disease) effective July 1, 2016. Intractable Pain was added as a qualifying medical condition by the commissioner of health, effective August 1, 2016.[1]

Table 2 shows the number of active patients in the patient registry who have been certified as having that qualifying medical condition. The three most frequently certified qualifying conditions are (1) intractable pain, (2) severe and persistent muscle spasms, including those characteristic of multiple sclerosis, and (3) cancer or its treatment, accompanied by severe or chronic pain, nausea, or severe wasting.

[1] Post-Traumatic Stress Syndrome (PTSD) was approved by the commissioner of health to become a qualifying medical condition effective August 1, 2017.

*Table 2: Count (%) of Active Patients by Condition**

Qualifying Condition	Patients Certified: N (%)
Glaucoma	53 (1%)
HIV/AIDS	63 (1%)
Tourette Syndrome	51 (1%)
ALS	18 (<1%)
Seizures	379 (6%)
Muscle Spasms	1055 (17%)
Inflammatory Bowel Disease, Including Crohn's Disease	238 (4%)
Cancer	742 (12%)
Terminal Illness	98 (2%)
Intractable Pain	4265 (69%)
Total	6184

*Patients certified total more than 100% because 11.9% of the 6184 patients have had more than one qualifying condition certified; in this table each certified condition is counted.

Figure 4 displays the number of active patients by age and gender. The average age of registered patients is 57.2 years, however the average age varies by qualifying medical condition.

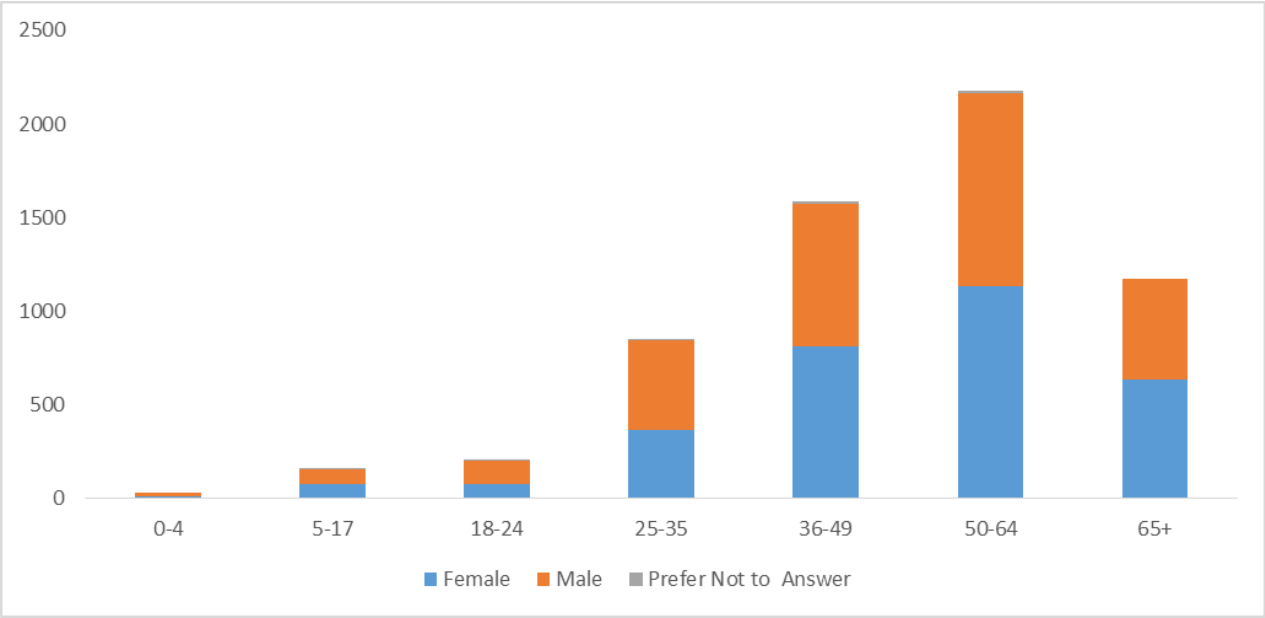

Figure 4. Breakdown of active patients by age and gender.

Table 3 demonstrates the breakdown of active, condition-specific patient counts by age. Patients certified as having Tourette syndrome have the lowest average age of 22.9 years; patients with ALS have the highest average age of 59.7 years.

Table 3: Breakdown of Active Patients by Age Group and Qualifying Medical Condition

Age (y)	All Conditions	Glaucoma	HIV/AIDS	Tourette Syndrome	ALS	Seizures	Muscle Spasms	Inflammatory Bowel Disease	Cancer	Terminal Illness	Intractable Pain
0-4	28(<1%)	0 (0%)	0 (0%)	1 (2%)	0 (0%)	23 (6%)	1 (0%)	0 (0%)	3 (0%)	0 (0%)	1 (0%)
5-17	156 (3%)	1 (2%)	0 (0%)	23 (45%)	0 (0%)	97 (26%)	12 (1%)	2 (1%)	13 (2%)	5 (5%)	19 (0%)
18-24	206 (3%)	1 (2%)	2 (3%)	6 (12%)	0 (0%)	54 (14%)	27 (3%)	20 (8%)	7 (1%)	3 (3%)	108 (3%)
25-35	854 (14%)	5 (9%)	16 (25%)	12 (24%)	1 (6%)	82 (22%)	168 (16%)	73 (31%)	56 (7%)	10 (10%)	563 (13%)
36-49	1585 (26%)	6 (11%)	17 (27%)	8 (16%)	5 (28%)	84 (22%)	329 (31%)	71 (30%)	116 (16%)	15 (15%)	1156 (27%)
50-64	2180 (35%)	19 (36%)	24 (38%)	1 (2%)	6 (33%)	25 (7%)	380 (36%)	56 (24%)	303 (41%)	31 (32%)	1591 (37%)
65+	1175 (19%)	21 (40%)	4 (6%)	0 (0%)	6 (33%)	14 (4%)	138 (13%)	16 (7%)	244 (33%)	34 (35%)	827 (19%)
Mean Age (SD)	50.2 (16.8)	57.5 (17.2)	44.9 (12.6)	22.9 (12.6)	59.7 (16.8)	27.5 (17.2)	48.5 (14.6)	41.9 (14.3)	57.0 (15.6)	56.1 (20.1)	51.8 (15.3)

Table 4 indicates the majority of enrolled patients come from or near the Minneapolis-St. Paul metropolitan area. Only 8.3 percent of enrolled patients come from the northern tier (defined as the Duluth, Brainerd, Bemidji, Detroit Lakes, and East Grand Forks zip code regions listed in Table 4).

Table 4. Approved and active patients, by region

Region	ZIP Codes	Active Patients
St Paul	55000-55199	1944
Minneapolis	55300-55599	2478
Duluth	55600-55899	242
Rochester	55900-55999	318
Mankato	56000-56199	213

Region	ZIP Codes	Active Patients
Willmar	56200-56299	181
St Cloud	56300-56399	424
Brainerd	56400-56499	139
Detroit Lakes	56500-56599	139
Bemidji	56600-56699	75
Grand Forks	56700-56799	28

Caregivers

There are two different groups of caregivers in the Minnesota medical cannabis program: designated caregivers and parents or legal guardians acting as caregivers. All caregivers must be enrolled in the patient registry system. A patient's parent or legal guardian may act as caregiver and be entered in the registry without having to qualify as a designated caregiver. A patient may have both registered designated caregivers and registered parents or legal guardians acting as caregivers.

The law permits patient to have a registered designated caregiver only if the patient's health care practitioner certifies that the patient suffers from a developmental or physical disability that prevents the patient from either self-administering the medication or acquiring the medication from a distribution facility. Registered designated caregivers must pass a criminal background check.

Table 5 displays the number of patients with active designated caregivers by condition.

Table 5: Active Designated Caregivers by Condition*

Qualifying Condition	Total Patients	Patient with Caregivers: N (%)
Glaucoma	53	3 (6%)
HIV/AIDS	63	1 (2%)
Tourette Syndrome	51	3 (6%)
ALS	18	6 (33%)
Seizures	379	33 (9%)
Muscle Spasms	1055	113 (11%)
Inflammatory Bowel Disease, Including Crohn's Disease	238	10 (4%)
Cancer	742	16 (16%)
Terminal Illness	98	29 (30%)

Qualifying Condition	Total Patients	Patient with Caregivers: N (%)
Intractable Pain	4265	275 (6%)
All Conditions	6184	502 (8%)

*A designated caregiver is limited to caring for one patient at a time, unless the patients live at the same address.

Table 6 shows the number of patients with registered parents or legal guardians authorized to pick up medical cannabis on the patient's behalf.

Table 6: Active Patients With Parents/Legal Guardians Authorized to Pick Up Medication

Qualifying Condition	Total Patients	Patients with PLGs: N (%)
Glaucoma	53	2 (4%)
HIV/AIDS	63	0 (0%)
Tourette Syndrome	51	31 (61%)
ALS	18	1 (6%)
Seizures	379	215 (57%)
Muscle Spasms	1055	34 (3%)
Inflammatory Bowel Disease, Including Crohn's Disease	238	9 (4%)
Cancer	742	25 (3%)
Terminal Illness	98	10 (10%)
Intractable Pain	4265	64 (2%)
All Conditions	6184	361 (6%)

Health Care Practitioners

Health care practitioners who can certify a patient's qualifying medical condition are Minnesota licensed physicians, physician assistants, and advanced practice registered nurses (APRNs). The health care practitioner must be enrolled in the medical cannabis registry before certifying a patient's qualifying medical condition.

As can be seen in Figure 5, the number of health care practitioners registering with the program continues to increase.

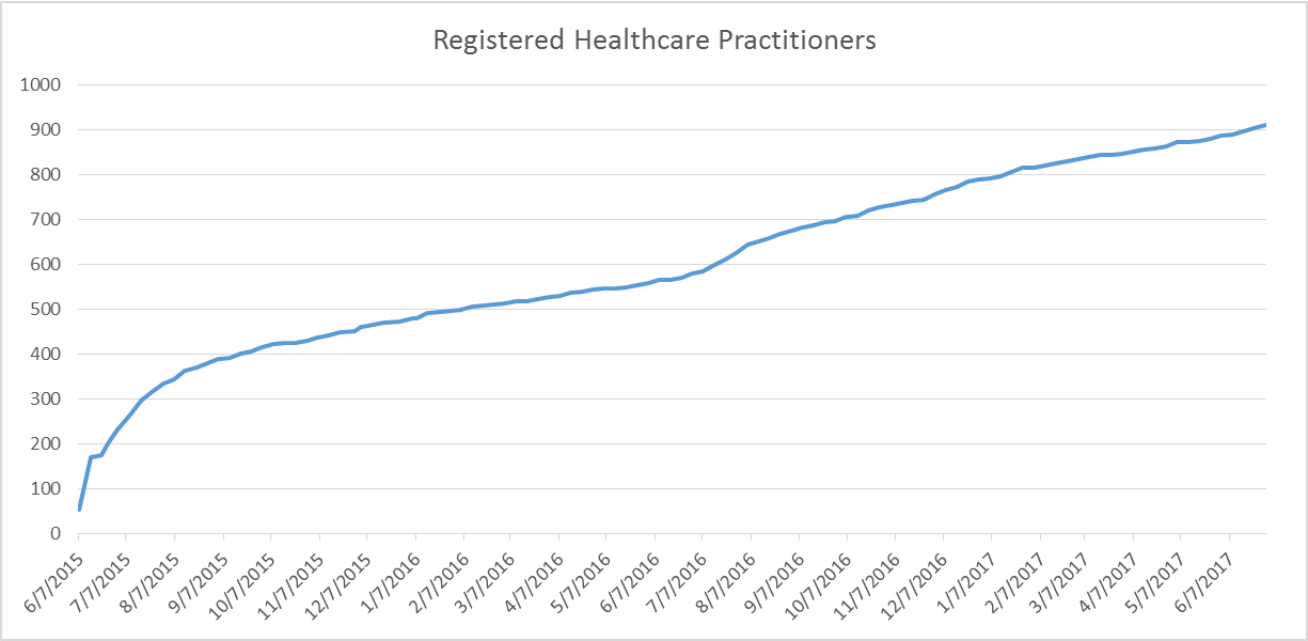

Figure 5. Count of registered health care practitioners actively in the patient registry since the program start.

Table 7 shows that as of June 30, 2017, 910 health care practitioners are approved in the registry system), and 730 are physicians, 51 are physician assistants, and 129 are APRNs.

Table 7: *Breakdown of Registered Health Care Practitioners by Type*

Healthcare Practitioner Type	N (%)
Physician	730 (80%)
Physician Assistant	51 (6%)
Advance Practice RN	129 (14%)
Total	910

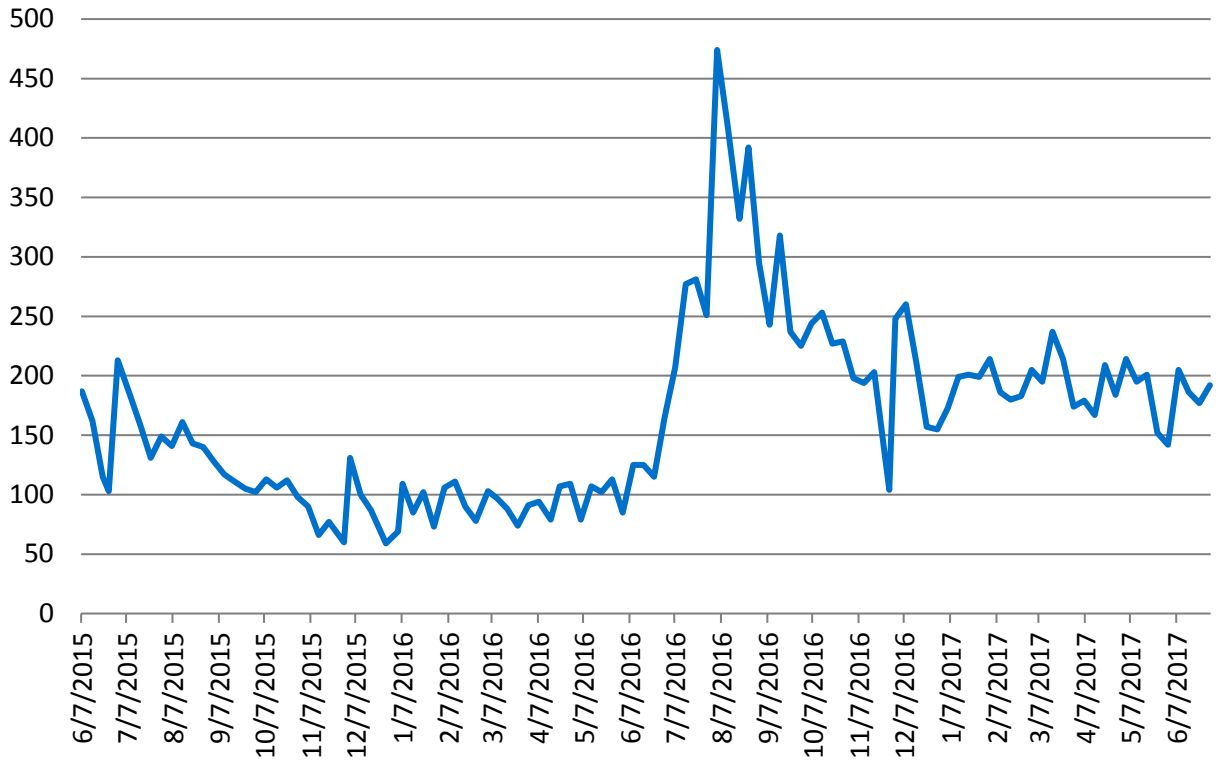

Figure 6. Number of weekly calls received since the program start.

Activity in the program increased beginning July 1, 2016, when patients with Intractable Pain became eligible to have their medical condition certified to be eligible for the program. Phone calls received by OMC increased beginning in June 2016 and the highest call volume week for the program came the first week of August 2016 with 474 calls received. OMC support center staff handled 184.85 calls per week (where they spoke with a caller) during the second quarter of 2017. This volume represents a decrease from the 225 calls per week handled during the last quarter of 2016 (immediately after the addition intractable pain as a qualifying medical condition), and an increase of 171 percent over the average of 108.08 calls handled per week during the second quarter of 2016.

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