DEPARTMENT OF HEALTH

Minnesota Medical Cannabis Program Update

Michelle Larson, Director

January 25, 2019

PROTECTING, MAINTAINING AND IMPROVING THE HEALTH OF ALL MINNESOTANS

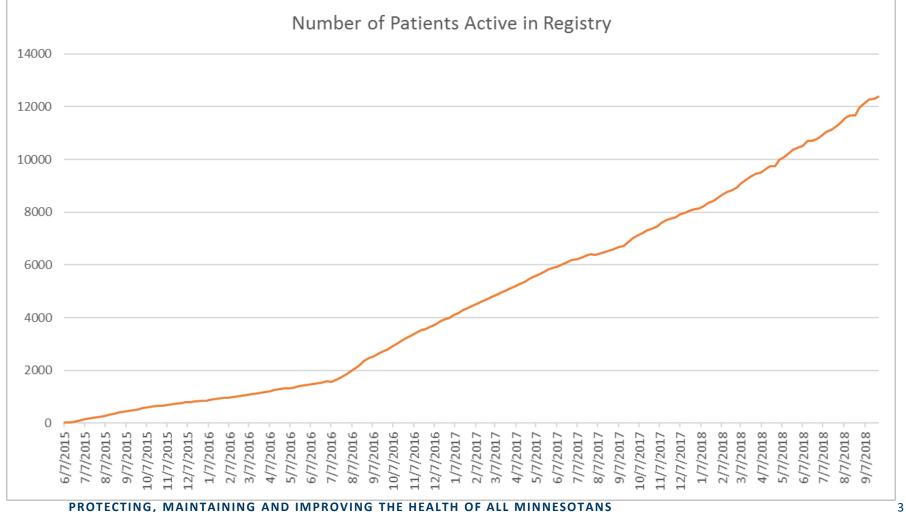


- OMC Program update
- Review of petition process
- Reports
- Legislative Agenda
- Research & Analytics Update

Patients Active in Registry

<u>As of 1/17/19</u>

Active patients: 14659 Health care providers: 1428 Caregivers: 1263



1/25/2019

OMC Call Center Activity

December, 2018 OMC Call Center Data:

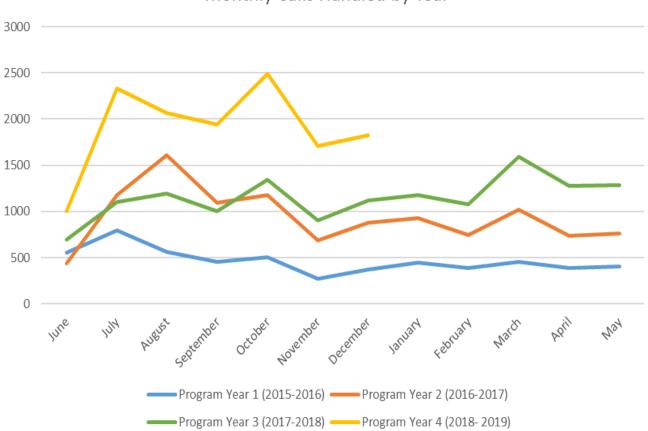
Phone Calls Received: 1,592

Patient Enrollment Approvals: 1,302

Caregiver Enrollment Approvals: 128

Health Care Practitioner Registration Approvals: 21

Call volume has more than tripled since July, 2015.



Monthly Calls Handled by Year

Petition Process to Add Conditions/Delivery Methods

- Condition Petitions received: 7 condition petitions: Alzheimer's disease, hepatitis
 C, juvenile idiopathic arthritis, opioid use disorder, panic disorder, psoriasis and traumatic brain injury
- Delivery Method Petitions received: edibles, flower, hash, nasal administration, & vaporized cannabis flower
- OMC staff produced research brief for each of the petitioned medical conditions: <u>http://www.health.state.mn.us/topics/cannabis/rulemaking/addconditions.html</u>
- Seven-member meetings (Fall 2018) public testimony
- November 1: Review Panel's report to Commissioner
- December 1: Commissioner's decision announced



January 15, 2019: State departments impacted by the program must report to Task Force co-chairs the costs incurred implementing the program.

(Minn.Stat. § 152.36, subd. 3)

February 1, 2019: Task Force co-chairs must submit a program impact assessment report to the legislature. (Minn.Stat. § 152.36, subd. 4)

Legislative

- MDH legislation will be released as a part of the Governor's Budget/Policy bill process.
- Aware of recreational cannabis bills being introduced and would anticipate that any impact on the medical cannabis program would be a part of the discussion.
- We cannot speak to any specific position on particular bills as we have not yet had that discussion with the Governor's Office

DEPARTMENT OF HEALTH

Research & Analytics Update

Susan Anderson, PhD

Research Scientist, OMC

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Data Sources

- Enrollment information
 - Healthcare practitioners, patients, caregiver
- Purchasing data
- Patient Self-Evaluation symptoms and side effects
- Surveys at six and twelve months (annually thereafter)

Reports Produced by the Office of Medical Cannabis (OMC)

- Weekly and Quarterly Numbers
- Cohort reports very comprehensive
 - Cohorts by:
 - Enrollment year
 - Qualifying condition (i.e., Intractable Pain patients)

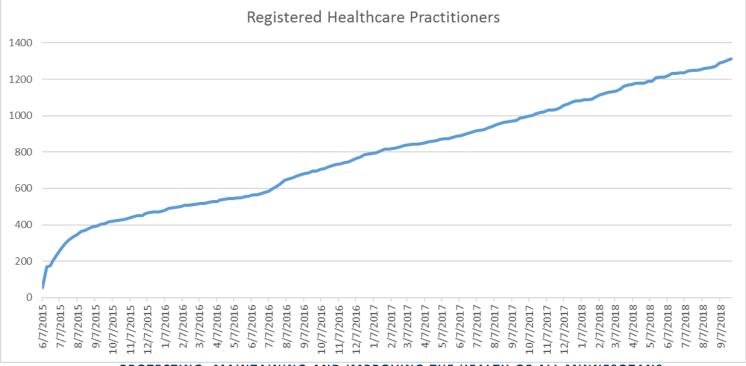
OMC website: <u>http://www.health.state.mn.us/topics/cannabis/index.html</u>

Approved Patient Numbers (N = 14660)

Condition	% of Patients (N = 14660)
Intractable Pain	63.8
PTSD	16.1
Muscle Spasms	12.4
Cancer	8.9
Seizures	4.2
IBD	3.1
OSA	3.2
Autism	2.6
Terminal Illness	0.9
Tourette Syndrome	0.8
Glaucoma	0.7
HIV or AIDS	0.7
ALS	0.2

Registered Healthcare Practitioners

1428 healthcare practitioners (HCPs) registered with the program as of Jan. 17, 2019



Two Published Reports

 Patients enrolled during first year of program operation (N = 1660)

 Intractable Pain patients enrolled during first 5-mo of addition as qualifying condition (N = 2245)

Forthcoming Reports

PTSD report – 1st 5-mo of patients

- Annual cohort report: patients enrolled 7/1/16 to 6/30/17
- Publication in *Journal of Oncology Practice* focus on symptom improvements in cancer patients

Intractable Pain Report - Highlights

Added as qualifying condition starting Aug. 1, 2016

 Intractable Pain report covers patients (N = 2245) enrolled Aug 1, 2016 to Dec 31, 2016

PEG Scale – Administered on Patient Self-Evaluation

- Validated pain tool (Krebs et al., 2009)
- Three questions rated on 0-10 numerical rating scale referring to patient experiences over last week
 - <u>Pain: pain on average</u>
 - <u>Enjoyment of life: pain interference with enjoyment of life</u>
 - <u>General activity: pain interference with general activity</u>

Main Questions re: PEG Scale Improvement

 What % of patients achieved ≥30% improvement on PEG within 4-mo of starting medical cannabis?

2) Of those patients achieving ≥30% improvement on PEG within 4-mo of starting medical cannabis, how many maintained that improvement, on average, in a follow-up 4mo period?

Main Questions re: PEG Scale Improvement

- What % of patients achieved ≥30% improvement on PEG within 4-mo of starting medical cannabis?
 42.3%
- 2) Of those patients achieving ≥30% improvement on PEG within 4-mo of starting medical cannabis, how many maintained that improvement, on average, in a follow-up 4mo period?
 - 51.6%

Clinician-Reported Opioid Reduction in IP Patients (40% Response Rate)

Among patients using opioid medications when they started medical cannabis, 64% were able to reduce or eliminate opioid usage after six months



Thank you.

Contact Us

Questions? Call us M-F 8 a.m.-4:30 p.m. at 651-201-5598 (metro), toll-free at 844-879-3381 (non-metro) or email <u>health.cannabis@state.mn.us</u>.



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