



# CANNABIS AS A CURE



# Medical Marijuana Industry Starts Putting Down Roots in Pa. Townships



When Pennsylvania legalized medical marijuana in 2016, it triggered a new industry that has already started taking root in some townships and brought the promise of jobs and revenue. At the heart of this story, though, is a group of determined moms, their sick children, and two state lawmakers who knocked down stigmas and got Harrisburg to see cannabis as a cure. Some said it would never happen. They proved them wrong.

BY JILL ERCOLINO / MANAGING EDITOR

Imagine waking up and seeing your son — your son who had just celebrated his fifth birthday — convulsing on your bedroom floor.

Imagine that one event changing your family's life forever. Your son, once bright and funny, no longer speaks, has the mental capacity of a 9- to 18-month-old, and has seizures, sometimes several, daily.

Imagine doing everything in your power to help him: meeting with doctors, trying all sorts of diets and medicines, and hoping for a miracle, a magic pill that will give your beautiful child some relief.

Nothing works.

Welcome to the world of Cara Salemmé, a York County mom of three boys whose twin son Jackson, now 11, contracted a virus that traveled to his brain, leaving him with pediatric epilepsy and his parents feeling helpless and bewildered.

"I remember the day we met with

our neurologist, and he told me that he had done everything he could," Salemmé says. "The doctor's hands were tied by what modern medicine had available."

She was beginning to realize, however, that her family was not alone. A TV show introduced the Salemmés to a child in Colorado who was having hundreds of seizures a day.

"I cried," Cara Salemmé says, "because I saw our own child in that little girl."

There was a big difference, though: their zip code.

## Changing the law

Because she lived in Colorado, the young girl had access to medical marijuana, which was legalized there in 2000 and had significantly reduced her seizures. It's also benefited children and adults with other serious conditions, such as cancer, glaucoma, arthritis, and autism.

Thousands of miles away in Pennsyl-

vania, however, cannabis as a cure was still controversial and widely unacceptable to those in Harrisburg who had the power to give kids like Jack Salemmé access to nontraditional medications.

"I saw that there was something else, a last-resort option that had the potential to change lives [in Pennsylvania] as it already had for a number of children who were lucky enough to live in the right zip code," Salemmé says. "I couldn't let that go. No parent should have to move mountains — or move to the mountains — to obtain a promising medical treatment.

"I'm not saying that cannabis is a cure-all for everything," she adds, "but I wanted to make sure that doctors in Pennsylvania have *all* options available for *all* patients. That's when we decided we were going to change the law."

Along the way, Salemmé connected with other moms on Facebook who were desperate to help their children, too, and eventually co-founded a

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grassroots medical marijuana advocacy group, Campaign for Compassion.

Still, she admits that she was naïve to the ways of Harrisburg and the glacier-like pace that even the most popular pieces of legislation move through the General Assembly.

“We met with one lawmaker who flat out told us we were crazy,” she says. “I realized then that this was not going to happen the way we thought.”

The seeds for success started taking root, however, when Campaign for Compassion found two supporters in the legislature: Sen. Daylin Leach, who had been introducing legislation to legalize medical marijuana since 2009, and Sen. Mike Folmer, a cancer survivor who, at the time, was undergoing chemotherapy.

During his treatment, Folmer had had his own issues with prescription drugs: The steroids made him hyperactive.

“I remember calling him one night, and he talked nonstop for 20 minutes,” Folmer’s Chief of Staff Fred Sembach recalls. “The steroids interfered with his sleep, too, so he spent that entire night

on his computer researching medical marijuana. That’s when he decided to pursue it on behalf of the patients, particularly the children.”

Together, the lawmakers, the families, and other medical cannabis supporters started shifting attitudes in Harrisburg and building bipartisan support for legalization.

“You know, people see the word ‘marijuana,’ and they immediately think advocates want to get high. No — people just want to get better — so we lobbied, and we lobbied hard,” Salemm says. “We had someone in the Capitol every day.”

It took four years, but that education and determination were the keys that unlocked change in Pennsylvania. “There were people who went from being solid ‘no’s,’” she says, “to being staunch supporters. They realized there could be a better way.”

Sembach puts it in these terms: When Leach first introduced medical marijuana legislation in 2009, he was the only sponsor. By 2015, the proposal had 27 sponsors, representing both parties.

A year later, in April, Pennsylvania became the 24<sup>th</sup> state to legalize marijuana for medical use. Only seven lawmakers voted against the measure, Act 16 of 2016, which prohibits the sale of “smokables.”

Instead, card-carrying patients with one of 17 medical conditions will be able to purchase pills, oils, topical cream, gels, and liquids. The conditions include cancer, epilepsy, glaucoma, HIV/AIDS, post-traumatic stress, and severe or chronic pain. (*Note: The full list of medical conditions appears in the sidebar on page 53.*)

The bill signing in the Capitol Rotunda that spring turned into a celebration as Folmer declared, “It’s law.” Leach removed a green bracelet, a gift from the mother of a sick child, that he promised not to take off until the bill became law. He wore the bracelet for three years.

“It is among our proudest moments, and it is our gift for generations to come,” Leach told the crowd that day. “I can’t help thinking this is what government is supposed to look like.”

“Elation and hope,” Salemm says. “That’s what you feel. It still brings tears to my eyes.”

“You never know what can happen. Life changes. Anyone can get sick. You never know what you or a loved one may need in the future. You may need these options.”

### Only the beginning

Legalization, however, was only the beginning for Pennsylvania.

## MEDICAL MARIJUANA: Resources for townships

Township officials who want to learn more about the medical marijuana industry and prepare for its potential impact on their community can turn to the following resources:

### From PSATS:

• **Sample ordinance** — Use this document as a guide for the location and placement of growing operations and dispensaries. Download it by logging onto [connect.psats.org](http://connect.psats.org), clicking on “Resources & Services,” choosing “Resource Center,” and entering the word “medical” in the search bar.

• **Prerecorded webinar** — “Pennsylvania’s Medical Marijuana Act: Is Your Township Prepared?” is one of many on-demand videos available at [connect.psats.org](http://connect.psats.org). The fee is \$20 for members and \$25 for non-members. Click on “Education,” choose “PSATS Education Catalog,” scroll down and click on “Archived Webinars” in the left-hand column, and enter the word “medical” in the search bar.

• **The Township Video News** — Our August 2016 TVN fea-

tured an interview with Sen. Mike Folmer, one of the architects of the state’s medical marijuana law. To watch, go to the “PSATS Videos” section of [www.psats.org](http://www.psats.org) on the far left of the home page and choose “Click to view other PSATS videos.”

• **Technical support** — Townships that have questions about this and other laws can call our knowledgeable staff weekdays between 8:30 a.m. and 4:30 p.m. at (717) 763-0930. For a list of staff emails and office extensions, go to [www.psats.org](http://www.psats.org), click on “About Us,” and choose “PSATS Staff.”

### From the state:

• **News and updates** — To get the most current information about Pennsylvania’s medical marijuana program, including the latest regulations to be released, go to the state Department of Health’s website, [www.health.pa.gov](http://www.health.pa.gov), scroll to “Hot Topics,” and click on “Pa. Medical Marijuana.”

Today, the state Department of Health is on a tight deadline to launch the commonwealth's medical marijuana program by 2018.

Part of a nationwide, multi-billion-dollar industry that employs 100,000 to 150,000 workers, Pennsylvania's program, once operational, will be worth \$333 million to \$665 million per year, according to early estimates. Jobs in security, marketing, sales, and research are among those expected to emerge.

For the DOH, building a fledgling industry from the ground up is a complex task that's requiring it to develop regulations (often described as "stringent"), issue permits to growing operations and dispensaries, create an online "seed-to-sale" tracking program, certify and register doctors, release ID cards to eligible patients, and establish research facilities at Pennsylvania's nine medical schools.

"The goal of the entire program is to make sure that patients who need this medication have access to it," DOH Press Secretary April Hutcheson says.

So far, so good.

"To its credit," Sembach says, "every deadline the Department of Health has established, it has met."

Recently, for instance, the DOH announced the recipients of its first round of permits. Twelve companies have been authorized to establish growing/processing operations, where all cultivation will be done indoors, and 27 have been given the greenlight to open dispensaries, or the stores where patients will purchase medical cannabis. When all is said and done, Pennsylvania will have 25 licensed growers/processors and 150 dispensaries.

One of the first growing facilities is scheduled to open in Cumberland Township, Greene County. Like other permittees, Philadelphia-based AgriMed has six months to make the business operational on the 60-acre site, once owned by a coal-mining company. About 100 new jobs are expected.

"We've had very little negative feedback," Annie Bargerstock, the town-

ship's code enforcement officer, told a reporter. "By and large, it's been people asking, 'Where do we go to apply for a job?'"

Another growing operation, Terapin Care Station, will be housed in a 40,000-square-foot building in Pine Creek Township, Clinton County, where modular homes were once built. In North Middleton Township, Cumberland County, a vacant sub shop will be torn down to make way for one of the state's first dispensaries.

North Middleton Township manager Deborah Ealer is cautiously optimistic.

"These facilities are highly regulated and are going to be beneficial to those who need them," she says. "We're also excited about the property being rehabilitated so we'll see what happens."

### 'The DOH is very serious'

Act 16 carved Pennsylvania into six medical marijuana regions, or clusters of counties. Each has been assigned two permits for operations that grow and process cannabis. Based on population

and other factors, each region has also been allotted a certain number of dispensary permits.

Because of the way the permitting process is designed, organizations have to pay hefty fees just to apply: \$10,000 fees for growers and \$5,000 for dispensaries. In addition, once granted a license, growers must pay \$200,000 and dispensaries \$30,000.

Permit applicants must also demonstrate that they have a location and that it is zoned for a medical marijuana operation. Earlier this year, this stipulation prompted a flurry of would-be operators to show up at township meetings.

Hutcheson says that community outreach and information-sharing are the cornerstone of Pennsylvania's program.

"All of the permittees," she says, "were advised as part of their application process to reach out to municipalities to seek their approval before starting their businesses in the community." Businesses, Hutcheson adds, are also expected to play by state and local rules or risk losing their license. ➤

## Help for Jack

York County's Cara Salemmé did what any parent would: She fought for her child. Today, thanks to her efforts and those of many others, thousands of Pennsylvanians, including Salemmé's 11-year-old son Jack, will soon have access to medical marijuana. The drug, legalized here in 2016, can reduce seizures like those plaguing Jack. It can also be used to treat other serious conditions, such as cancer, glaucoma, arthritis, and autism.





# Employers, employees, and medical marijuana

The Pennsylvania Medical Marijuana Act (Act 16 of 2016) protects registered patients from unfair discrimination in the workplace without requiring employers to violate federal law. It also prohibits patients from participating in certain high-risk activities while under the influence of medical marijuana and allows employers to ensure a safe workplace.

Townships, therefore, should review their employee policy manual to make sure it's consistent with the law's requirements. Supervisors and employees should also keep the following in mind:

- Employers may not discriminate against employees solely on the basis that they are certified to use medical marijuana.
- Employers do not have to make accommodations for the use of medical marijuana on their property or premises.
- Employers may discipline employees for "being under the influence of medical marijuana in the workplace or for working while under the influence of medical marijuana when the employee's conduct falls below the standard of care normally accepted for that position."
- Patients who have more than 10 nanograms per milliliter of THC in their blood may not operate high-voltage electricity or other public utility or be in physical control of chemicals that require a federal or state permit.
- Employers may prohibit patients who are employees from performing mining or any other "employment duties at heights or in confined spaces" while under the influence of marijuana.
- Employers may prohibit patients under the influence of marijuana from performing any task that the employer deems to be life-threatening to the employee or other employees. In addition, "the prohibition shall not be deemed an adverse employment decision even if the prohibition results in financial harm for the patient."

\* Information courtesy of the Marijuana Policy Project



"The regulatory compliance process includes weekly telephone meetings with permittees and recurring visits [to] sites and facilities," she says. "These actions are to make sure that each permittee is following its plans of operation."

In addition to having procedures to maintain the site and its facility, manage inventory at all stages, develop products, and monitor the sale of cannabis, licensed businesses must also meet with local law enforcement to discuss security and surveillance.

And once the growing operations and stores open, state inspectors will be making announced and unannounced visits to ensure continued compliance, says Judith Cassel, an attorney with Hawke McKeon & Sniscak LLP in Harrisburg.

"The DOH is very serious about all of this," Cassel adds. "These are going to be low-key, professionally run organizations with tight, high-tech security. My No. 1 message to everyone is that there's nothing to be concerned about."

Patrick Nightingale, executive director of the nonprofit Pennsylvania Medical Cannabis Society, agrees: "There's been a lot of misunderstandings about dispensaries...that they're going to attract criminals and be a detriment.

"All of these facilities, however, have significant and elaborate plans for security. In fact, they're going to be far more secure than any pharmacy."

## Next steps

While the industry is busy putting down roots, the DOH is working on certifying and registering the doctors who will approve patients for medical marijuana use.

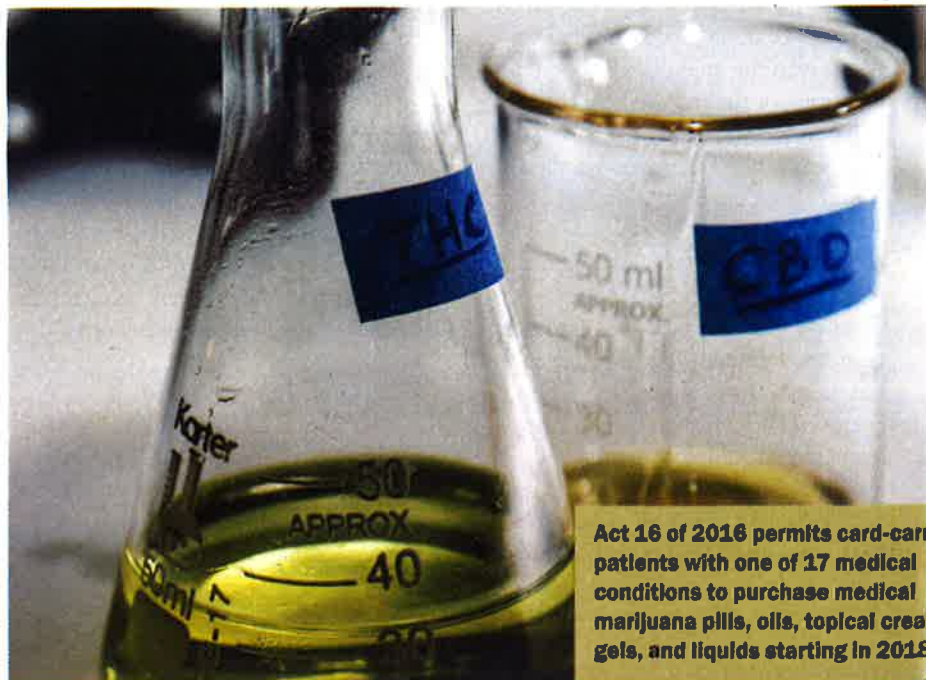
Under this critical phase of the program, physicians must complete a four-hour training course, among other things.

Although Hutcheson says that the response from doctors has been "largely positive" — 75 percent of those surveyed by the Department of Health plan to register to recommend cannabis treatments — Nightingale says programs in other states, such as New York, have faltered due to lack of participation.

"There's a real risk of the whole experiment falling apart if doctors don't participate," he says. "That's why it's crucial now for patients to talk to their doctors, ask for this medication, and encourage them to participate."

Mom of three Cara Salemme agrees: "I was really afraid to discuss this with our doctor — would he think I was crazy to want this for my child? — but it's not as taboo as it used to be, and it's up to us, as patients, to start opening the doctors' minds.

"Everyone," she adds, "should at least have the right to try it." ♦



Act 16 of 2016 permits card-carrying patients with one of 17 medical conditions to purchase medical marijuana pills, oils, topical creams, and liquids starting in 2018



# Medical marijuana FAQs



This Q&A was developed by the state Department of Health in response to Act 16 of 2016, which legalized medical marijuana:

## **Q Who will be able to access medical marijuana?**

**A** Patients with serious medical conditions will be able to access medical marijuana with a physician's certification at designated state dispensaries.

## **Q What will the Department of Health consider as a serious medical condition?**

**A** A serious medical condition is any one of the following listed under the statute:

- Amyotrophic lateral sclerosis
- Autism
- Cancer
- Crohn's Disease
- Damage to the nervous tissue of the spinal cord with objective neurological indication of intractable spasticity
- Epilepsy
- Glaucoma
- HIV/AIDS
- Huntington's disease
- Inflammatory bowel syndrome
- Intractable seizures
- Multiple sclerosis
- Neuropathies
- Parkinson's disease
- Post-traumatic stress disorder
- Severe chronic or intractable pain
- Sickle cell anemia

## **Q What is the process for patients to qualify for medical marijuana?**

**A** To purchase medical marijuana, a patient will need to be under the continuing care of a physician who is registered with the Department of Health. The physician may then provide a signed certification to the patient stating that the patient has a serious medical condition.

The patient must then apply to the DOH for an identification card. Once the patient receives an identification card, he or she can purchase medical marijuana at an authorized dispensary.

## **Q How will patients apply for medical marijuana identification cards?**

**A** Patients must obtain certification from a registered physician and submit an application to the Department of Health. The DOH, which intends to make it as easy as possible for patients to apply for ID cards, is reviewing how to make applications available on its website.

## **Q Can a patient with a serious medical condition receive medical marijuana if they are under 18?**

**A** A patient under the age of 18 must have a caregiver who is approved by the DOH to obtain medical marijuana. A caregiver can be a parent, guardian, or someone else approved by the department.

## **Q Can someone else obtain medical marijuana on behalf of a patient?**

**A** Yes. When a patient applies to the department for an identification card, he can designate up to two caregivers. A caregiver can assist up to five patients. Before obtaining medical marijuana for a patient, a caregiver must also apply for a medical marijuana identification card.

## **Q Where will patients obtain medical marijuana?**

**A** Only a patient or caregiver with a state-issued identification card can purchase medical marijuana at an authorized dispensary. The department will authorize up to 150 dispensaries across the state.

## **Q What else will the medical marijuana program do for Pennsylvania?**

**A** The medical marijuana program also includes funding for research institutions to study the use of medical marijuana to treat other serious conditions. In addition, Act 16 establishes an advisory committee that will review the research and recommend changes to the act to the legislature.

In addition to funding for implementation and research, the act also provides revenue to the Department of Drug and Alcohol Programs for drug abuse prevention, counseling, and treatment services, as well as to the Pennsylvania Commission on Crime and Delinquency for distribution to local police departments.