Testimony in Support of Legislative Adjustments to the North Dakota Medical Marijuana Program

Dear Chairperson Ruby and Members of the Committee,

Thank you for allowing me the opportunity to testify. My name is Casey Neumann and I am the CEO of Pure Dakota Health, with medical dispensaries in Bismarck, Fargo, and Williston. I also operate Pure Dakota, North Dakota's medical marijuana manufacturing facility. I am not only a business owner—I am a North Dakotan who sees first-hand the patients who depend on this program for relief.

Every day, I see patients who share how medical marijuana has changed their lives. I hear from parents whose children's seizures have gone from hundreds a day to only a few rare occurrences. I see people who have suffered in silence with debilitating anxiety finally able to leave their homes, go to work, and engage with their communities. These are real people—our neighbors, friends, and family members—whose lives have been transformed.

But for every success story, there are heartbreaking accounts of those who are struggling. Patients who can't afford the frequent certification renewals or can't find a provider willing to certify their condition. Rural residents are forced to travel hours for an in-person appointment—not to receive a diagnosis, but simply to have a provider confirm a condition they've already been living with for years, just to satisfy state requirements for medical marijuana eligibility. Veterans, many of whom are already navigating complex medical systems, are being asked to jump through unnecessary hoops.

We can do better.

Challenges That Must Be Addressed

1. Access to Certification

The requirement for an in-person visit to certify a qualifying condition creates an unnecessary barrier. Patients aren't asking providers to diagnose them—they are simply seeking certification to confirm what they already know: that they meet the program's requirements. For someone with chronic pain or mobility challenges, traveling long distances is more than inconvenient; it can be impossible.

What needs to change

Allow Telehealth for Initial Certifications: Patients should not have to endure the burden of in-person visits when telehealth can provide the same level of care. This change would make certification more accessible for rural residents and those with mobility challenges.

2. The Financial Burden of Certification

Many patients are already financially struggling due to medical expenses, and the short certification periods only add to their burden. When someone is paying \$175 to \$300 for a single visit, sometimes multiple times per year, it forces them to make impossible choices between medicine and other basic needs.

What needs to change

Extend Certification Durations: Lengthening certification periods to one year for new patients and two years for renewals would reduce financial strain and prevent unnecessary hurdles.

3. A Lack of Product Options

The absence of edibles in the program has pushed patients to unsafe and illegal practices. I've spoken with individuals who attempt to make their own edibles at home without proper equipment or understanding of dosage. This not only creates products that are ineffective but also puts them at serious risk of harm.

What needs to change

Permit Limited Edible Products: We are proposing the addition of a single edible product to the medical program. This product would be a 1-inch geometric square, clearly marked with the state-approved THC symbol to ensure proper identification and compliance. This solution has been developed in collaboration with the Department of Health & Human Services and prior DHHS Legislative Committees to provide patients with a safe and regulated option.

Allowing safely produced, pre-dosed edibles ensures that patients have access to the medicine they need without resorting to unsafe or illegal alternatives. With clear packaging guidelines—such as limiting doses to 5 mg per serving and 50 mg per package—Pure Dakota is fully equipped to comply with safety regulations, protect patients, and expand their options.

4. The Impact of Neighboring States

When Montana legalized recreational marijuana, we witnessed a direct and measurable impact on Western North Dakota's medical program. Patients began crossing the border for easier access, creating strain on the system for those who remained. This isn't speculation—I've seen the evidence in our revenue. Since recreational marijuana sales began in Montana on January 1, 2022, revenue at our Williston dispensary has declined by 51%. This wasn't due to a recession or lack of interest—our other dispensaries saw revenue increases or remained stable. The only clear factor driving this decline is that patients who once purchased from us in Williston are now crossing the border to purchase marijuana illegally.

The only reason we survived is that the population density in the west is relatively low. But with Minnesota's legalization, Eastern North Dakota's medical program could face crippling challenges. Some patients will leave the state in search of recreational options, which not only drives up costs for those who rely on the program and cannot afford to leave, but also puts them at risk of breaking the law.

What needs to change

Simplify Certification for Vulnerable Populations: Veterans often face the greatest barriers to access. Allowing them to use attestations and government IDs instead of formal provider certifications would ensure they are not left behind.

Why This Matters

North Dakota's medical marijuana program has already demonstrated its profound value. In the fiscal year of 2023, it served over 9,500 patients, generated \$21.6 million in sales, and contributed \$1.5 million in tax revenue. But we are at a critical juncture. Without these adjustments, the program risks failing the very people it was designed to help.

This isn't just about numbers; it's about the lives of our friends, families, and neighbors. It's about ensuring that those in our communities who depend on this program can continue to live fuller, healthier lives. As North Dakotans, we have a responsibility to support one another—not force our neighbors to leave the state to access the care they desperately need.

A Call to Action

We have the opportunity to make meaningful changes that will strengthen North Dakota's medical marijuana program and protect the patients who depend on it. I urge you to:

- 1. Approve telehealth for initial certifications.
- Extend certification durations.
- 3. Allow the inclusion of edible products under strict guidelines.
- 4. Simplify certification processes for veterans and out-of-state patients.

Thank you for your time and consideration. I am more than willing to answer any questions or provide additional details about these recommendations. Together, we can ensure this program continues to serve the people who need it most.

Sincerely,

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