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## FISCAL IMPACT REPORT

SPONSOR Ortiz y Pino ORIGINAL DATE 2/10/18  
LAST UPDATED \_\_\_\_\_ HB \_\_\_\_\_  
SHORT TITLE Medical Cannabis Affordability Task Force SM 105/aSPAC  
ANALYST Chilton

### ESTIMATED ADDITIONAL OPERATING BUDGET IMPACT (dollars in thousands)

	FY18	FY19	FY20	3 Year Total Cost	Recurring or Nonrecurring	Fund Affected
<b>Total</b>		See Fiscal Implications				

(Parenthesis ( ) Indicate Expenditure Decreases)

Relates to SM 55/HM 67, which are identical and to numerous other bills dealing with regulation of cannabis.

### SOURCES OF INFORMATION

LFC Files

### SUMMARY

#### Synopsis of SPAC Amendment

The Senate Public Affairs Committee amendment adds a representative of the New Mexico Attorney General to the group studying medical cannabis affordability and accessibility.

#### Synopsis of Memorial

Citing the problems that patients with conditions permitting them to use medical cannabis have with affording the drug, Senate Memorial 105 asks that New Mexico's Drug Policy Alliance convene a task force to make recommendations to alleviate problems with cannabis affordability and accessibility. The task force would report its findings and recommendations to the Legislative Committee on Health and Human Services by November 1, 2018.

Members of the group would include:

- Representative from the Department of Health (DOH)
- A patient using medical cannabis from a rural part of New Mexico
- The medical cannabis patient who has a license to grow his/her own medical cannabis
- A military veteran using medical cannabis
- A representative from the licensed nonprofit producers of medical cannabis in New Mexico

- Others with expertise chosen by the Drug Policy Alliance.

Along with considering general aspects of medical cannabis affordability and accessibility, the task force is asked specifically to provide recommendations regarding relevant intergovernmental agreements between state government, as directed through DOH and tribal governments that might choose to produce medical cannabis.

## **FISCAL IMPLICATIONS**

DOH representation on the task force, and any other state government entities participating in the task force would require personnel time.

## **SIGNIFICANT ISSUES**

The Drug Policy Alliance (DPA) states that “New Mexico was the first state to license cannabis production at the state level, and became a national model. The medical cannabis program has grown steadily over the years and now serves more than 45,000 patients.

“DPA continues to serve as a watchdog for the program and engages as necessary to ensure patients have access to medical cannabis and to hold the Department of Health accountable for meeting patient needs, statutory requirements and regulations.”

The memorial’s preambles indicate that the cost of medical cannabis is a problem for many patients, and that insurance does not, in general, pay for it even when insurance programs usually pay for medications such as opioids.

Leafbuyer.com indicates the cost of marijuana in New Mexico: “Medical patients can expect to pay between \$10-\$15 per gram of flower, though it can vary based on the strain. Edibles can vary greatly based on the product potency. On average, you can expect to pay \$10 to \$20 for 100 mg of THC [tetrahydrocannabinol].” Doses used by patients vary widely.

## **TECHNICAL ISSUES**

On the one hand, the Drug Policy Alliance has considerable expertise on medical use of cannabis; on the other hand, the organization has taken a strong stand in favor of legalizing recreational marijuana for adults, so cannot be considered an unbiased source of information.

**RELATIONSHIP** with many bills over the past several years, regulating use of cannabis and the medical marijuana program:

- 2016 HB 241 Opioid abuse prevention and assisted treatment (not passed)
- 2016 HB 277 Administration of opioid antagonists (passed)
- 2017 HB 370 Opioid overdose education (passed)
- 2018 HM 12 Opioid Crisis Subcommittee
- 2018 HM 56 Study Heroin-assisted Treatment (introduced)
- 2018 HM 67/SM 55 Medical Marijuana and Opioid Use Disorder (introduced)
- 2015 HM 98 Study chronic pain patients and overdoses (passed)
- 2017 SB 16 Opioid overdose medication counseling (not passed)
- 2015 SB 24 UNM pain management center (not passed)

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- 2018 SB 35 Overdose and medication counseling (introduced)
- 2017 SB 47 Further overdose assistance immunity (passed, vetoed)
- 2018 SB 127 Chronic pain management training (introduced)
- 2016 SB 191 Opioid abuse prevention and assisted treatment (not passed)
- 2016 SB 262 Administration of opioid antagonists (passed)
- 2016 SB 263 Opioid prescription monitoring (passed)
- 2015 SB 371 Expand Focus-Milagro Integrated Care Model (not passed)
- 2015 SB 422 Pain relief act changes (not passed)
- 2018 SJM 15 Study efficacy of naprapathic medicine (introduced)
- 2015 SJM 27 Study opioid prescription drug dependence (not passed)
- 2016 SM 104 Study Opioid abuse (not passed)

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