



Medical Cannabis Program Update

APRIL 2018

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 March 31, 2018. 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 March 31, 2018. 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.

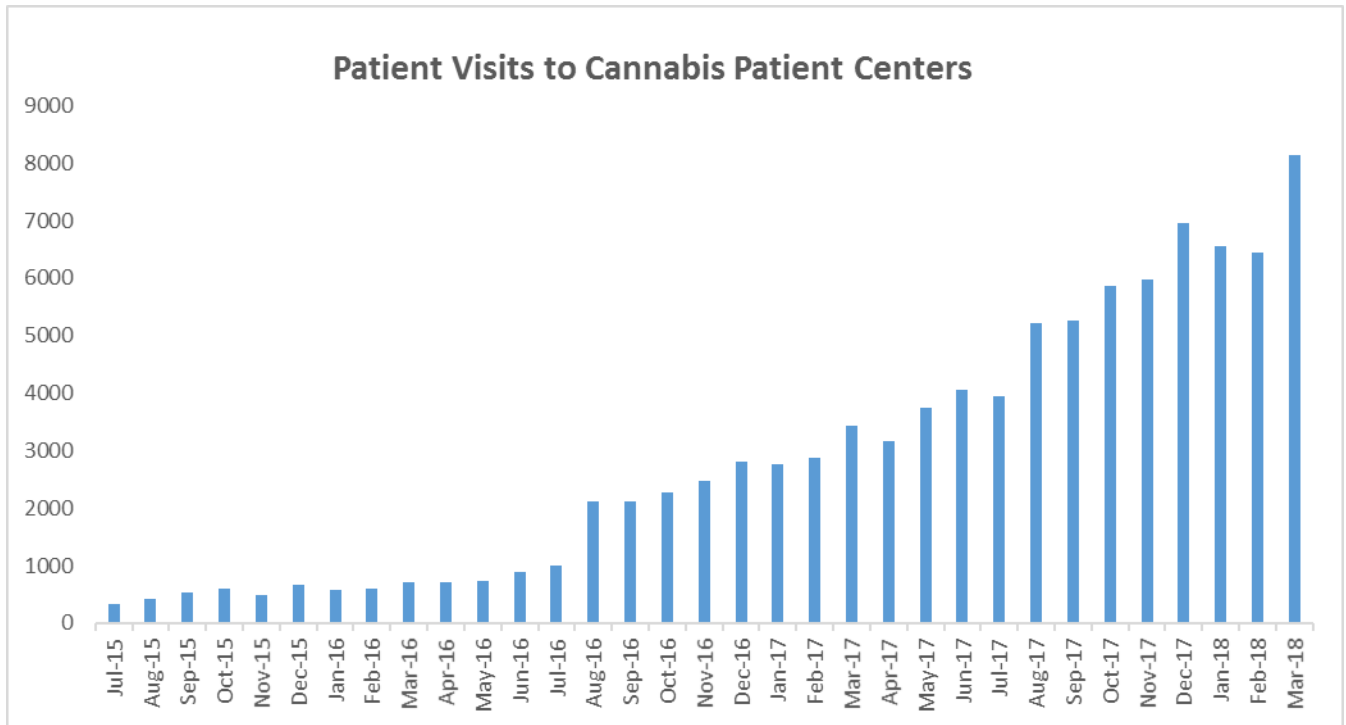


Figure 1. Total number of patient visits to a Cannabis Patient Center which resulted in purchase of medical cannabis products, by month.

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 March 31, 2018, there were 9,435 patients actively enrolled in the patient registry, an increase of 4,316 from the 5,119 enrolled on March 30, 2017.

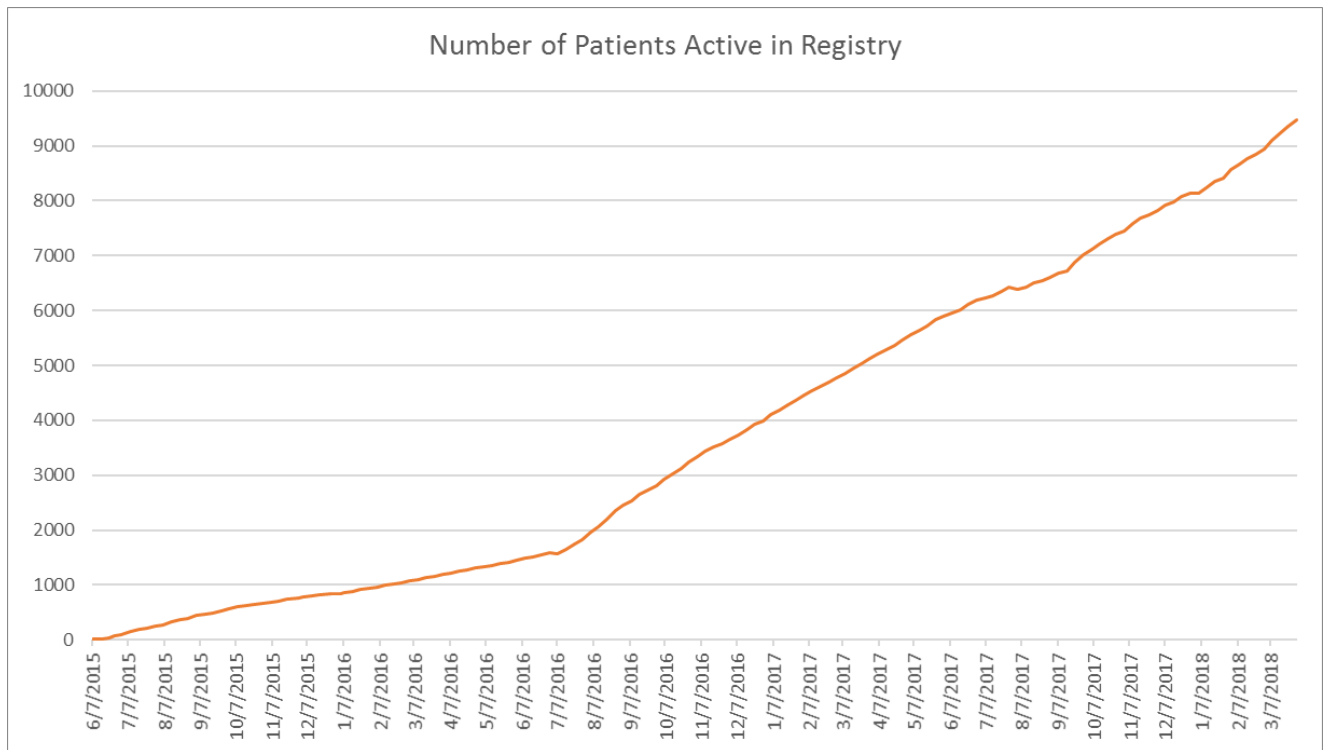


Figure 2. Weekly number of patients enrolled and in active status in registry.

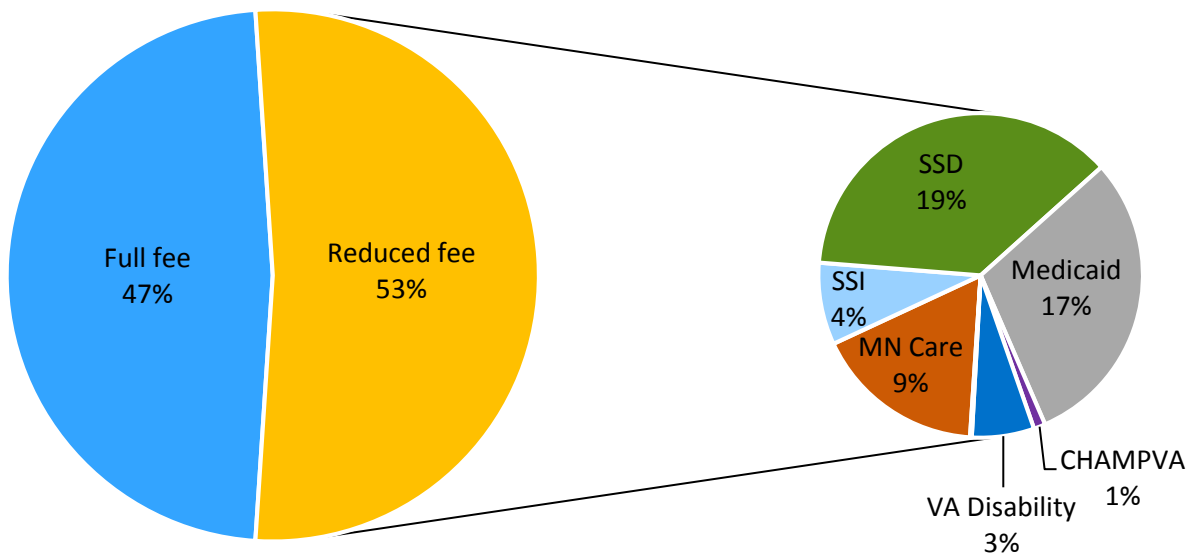


Figure 3. Breakdown of active patients by fee type (reduced vs. full fee) and types of government assistance for reduced fees, as of March 31, 2018.

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 53 percent of registered patients have qualified for the reduced enrollment fee, as of March 31, 2018.

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

Table 1: Active Patient Race and Ethnicity Compared to Overall State Demographics, as of March 31, 2018

Race/Ethnicity	Medical Cannabis Registry	2014 Census Bureau Estimates*
American Indian	247 (2.6%)	1.9%
Asian	104 (1.1%)	5.0%
Black	493 (5.2%)	6.5%
Hawaiian	8 (0.1%)	0.1%
White	8168 (86.6%)	87.5%
Hispanic	210 (2.2%)	4.9%
Other	173 (1.8%)	1.7%
Unknown	100 (1.1%)	

*<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. The commissioner of health added Intractable Pain, effective August 1, 2016, and Post-Traumatic Stress Syndrome (PTSD), effective August 1, 2017, as qualifying medical conditions. The commissioner has also conditionally added Autism Spectrum Disorder and Obstructive Sleep Apnea as qualifying conditions, to be effective August 1, 2018.

Table 2 shows the number of active patients in the patient registry who have been certified as having that qualifying medical condition. As of March 31, 2018, 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) PTSD.

Table 2: Count (%) of Active Patients by Condition, * as of March 31, 2018

Qualifying Condition	Patients Certified: N (%)
Glaucoma	77 (1%)
HIV/AIDS	87 (1%)
Tourette Syndrome	97 (1%)
ALS	21 (<1%)
Seizures	482 (5%)
Muscle Spasms	1447 (15%)
Inflammatory Bowel Disease, Including Crohn's Disease	321 (3%)
Cancer	926 (10%)
Terminal Illness	115 (1%)
Intractable Pain	6171 (65%)
Post-Traumatic Stress Disorder	1265 (13%)
Total	9435

*Patients certified total more than 100% because 12.4% of the 8075 patients are currently certified for more than one condition; 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 49.2 years; however, the average age varies by qualifying medical condition.

MN MEDICAL CANNABIS PROGRAM UPDATE, APRIL 2018

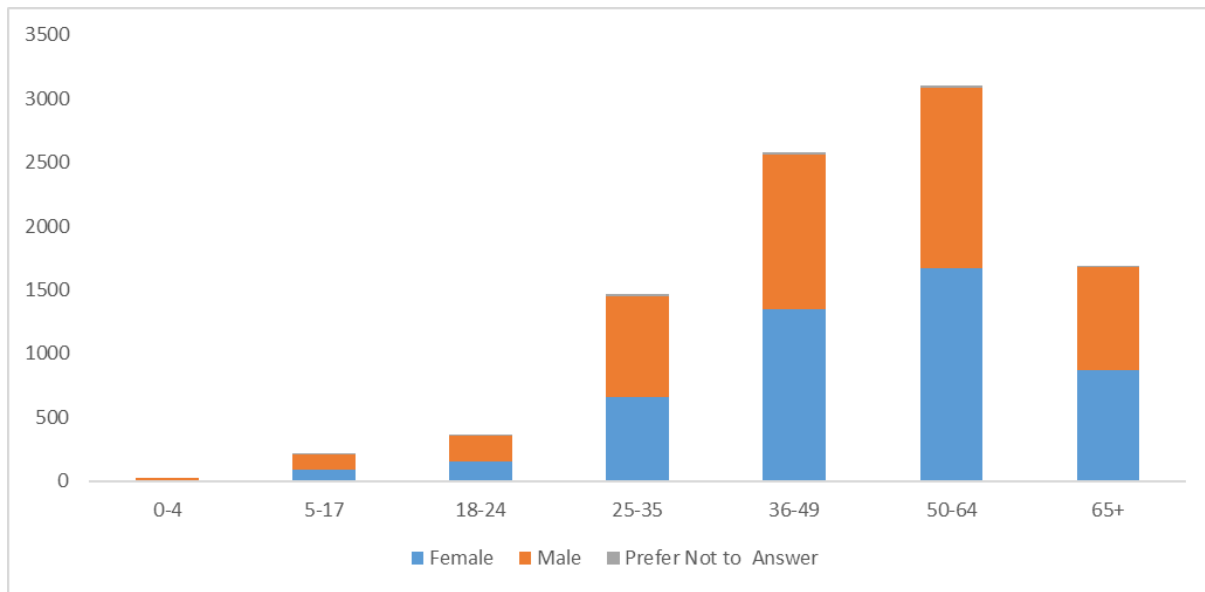


Figure 4. Breakdown of active patients by age and gender, as of March 31, 2018.

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 23.9 years; patients with cancer have the highest average age of 57.7 years.

Table 3: Breakdown of Active Patients by Age Group and Qualifying Medical Condition, as of March 31, 2018

Age (y)	All Conditions	Glaucoma	HIV/AIDS	Tourette Syndrome	ALS	Seizures	Muscle Spasms	Inflammatory Bowel Disease	Cancer	Terminal Illness	Intractable Pain	Post-Traumatic Stress Disorder
0-4	21 (<1%)	0 (0%)	0 (0%)	1 (1%)	0 (0%)	14 (3%)	1 (<1%)	0 (0%)	5 (1%)	1 (1%)	0 (<1%)	0 (0%)
5-17	214 (2%)	1 (1%)	0 (0%)	41 (42%)	0 (0%)	112 (23%)	16 (1%)	6 (2%)	7 (1%)	4 (3%)	24 (<1%)	24 (2%)
18-24	364 (4%)	1 (1%)	1 (1%)	14 (14%)	0 (0%)	82 (17%)	55 (4%)	20 (6%)	15 (2%)	4 (3%)	151 (2%)	89 (7%)
25-35	1467 (16%)	6 (8%)	24 (28%)	24 (25%)	2 (10%)	107 (22%)	240 (17%)	91 (28%)	43 (5%)	12 (10%)	798 (13%)	423 (33%)
36-49	2580 (27%)	15 (19%)	28 (32%)	13 (13%)	3 (14%)	109 (23%)	449 (31%)	108 (34%)	147 (16%)	13 (11%)	1745 (28%)	422 (33%)
50-64	3106 (33%)	30 (39%)	32 (37%)	3 (3%)	11 (52%)	41 (9%)	499 (34%)	69 (21%)	397 (43%)	41 (36%)	2241 (36%)	239 (19%)
65+	1683 (18%)	24 (31%)	2 (2%)	1 (1%)	5 (24%)	17 (4%)	187 (13%)	27 (8%)	312 (33%)	40 (35%)	1212 (20%)	68 (5%)
Mean Age (SD)	49.2 (16.5)	49.2 (14.5)	44.2 (10.8)	23.9 (13.9)	56.8 (14.6)	29.6 (16.8)	47.9 (14.6)	42.2 (14.7)	57.7 (14.5)	56.1 (19.4)	51.7 (15.2)	40.3 (13.2)

Table 4 indicates the majority of enrolled patients come from or near the Minneapolis-St. Paul metropolitan area. Only 8.5 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 zip code region, as of March 31, 2018

Region	ZIP Codes	Active Patients
St Paul	55000-55199	2895
Minneapolis	55300-55599	3852
Duluth	55600-55899	428
Rochester	55900-55999	352
Mankato	56000-56199	350
Willmar	56200-56299	278
St Cloud	56300-56399	593
Brainerd	56400-56499	206
Detroit Lakes	56500-56599	210
Bemidji	56600-56699	103
E Grand Forks	56700-56799	62

Caregivers

Patients who require extra help can use their registry account to invite caregivers to assist them in picking up medical cannabis from a cannabis patient center or in administering the medical cannabis. 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 a 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 CPC. Registered designated caregivers must pass a criminal background check.

Table 5 displays the number of patients with registered designated caregivers or registered parents/legal guardians, by qualifying medical condition, as of March 31, 2018.

Table 5: Active Designated Caregivers and/or Registered Parents/Legal Guardians by Condition,* as of March 31, 2018

Qualifying Condition	Total Patients	Patient with Registered Caregivers: N (%)	Patients with Registered PLGs: N (%)	Patients with Caregiver and/or PLG: N (%)
Glaucoma	77	4 (5%)	2 (3%)	6 (8%)
HIV/AIDS	87	1 (1%)	0 (0%)	1 (1%)
Tourette Syndrome	97	4 (4%)	59 (61%)	59 (61%)
ALS	21	8 (38%)	0 (0%)	8 (38%)
Seizures	482	44 (9%)	252 (52%)	273 (57%)
Muscle Spasms	1447	178 (12%)	51 (4%)	226 (16%)
Inflammatory Bowel Disease, Including Crohn's Disease	321	17 (5%)	14 (4%)	30 (9%)
Cancer	926	162 (17%)	23 (2%)	184 (20%)
Terminal Illness	115	34 (30%)	11 (10%)	44 (38%)
Intractable Pain	6171	422 (7%)	86(1%)	504 (8%)
Post-Traumatic Stress Disorder	1265	21 (2%)	29 (2%)	50 (4%)
All Conditions	9435	730 (8%)	477 (5%)	1173 (12%)

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

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.

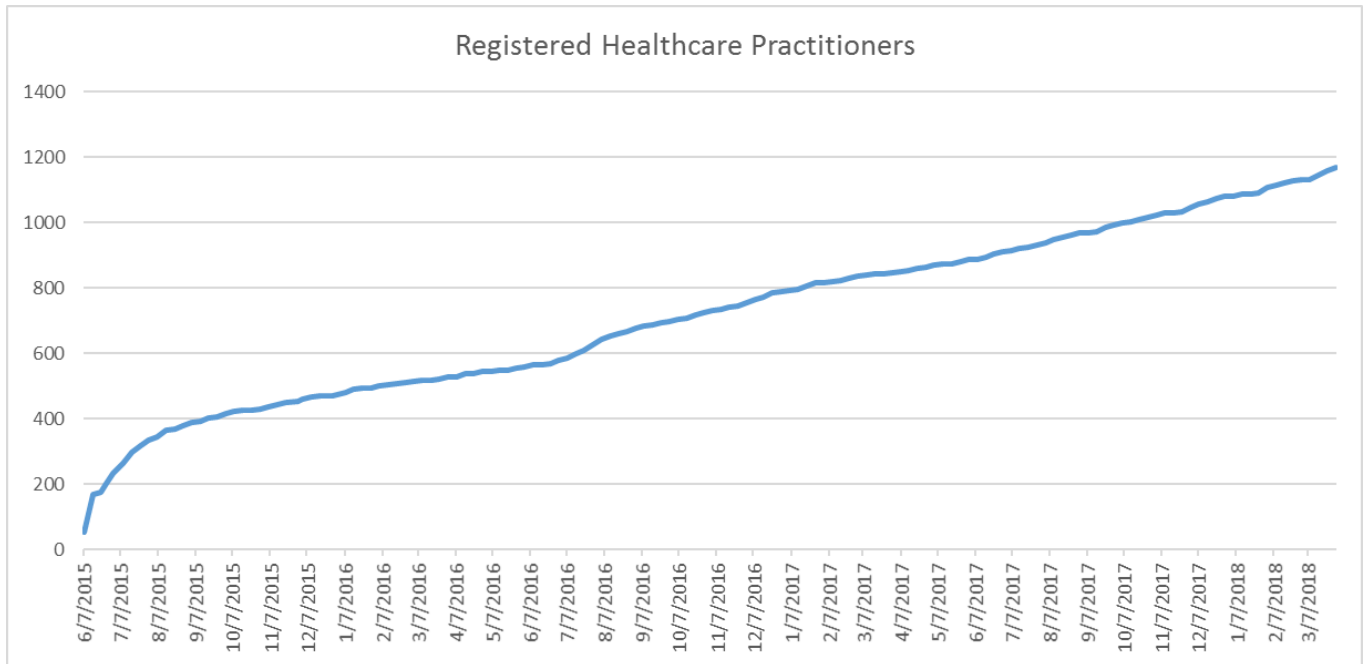


Figure 5. Count of registered health care practitioners actively in the patient registry since the program start.

Table 6 shows that as of March 31, 2018, 1169 health care practitioners are approved in the registry system), and 903 are physicians, 76 are physician assistants, and 190 are APRNs.

Table 6: Breakdown of Registered Health Care Practitioners by Type, as of March 31, 2018

Healthcare Practitioner Type	N (%)
Physician	903 (77%)
Physician Assistant	76 (7%)
Advanced Practice RN	190 (16%)
Total	1169

MN MEDICAL CANNABIS PROGRAM UPDATE, APRIL 2018

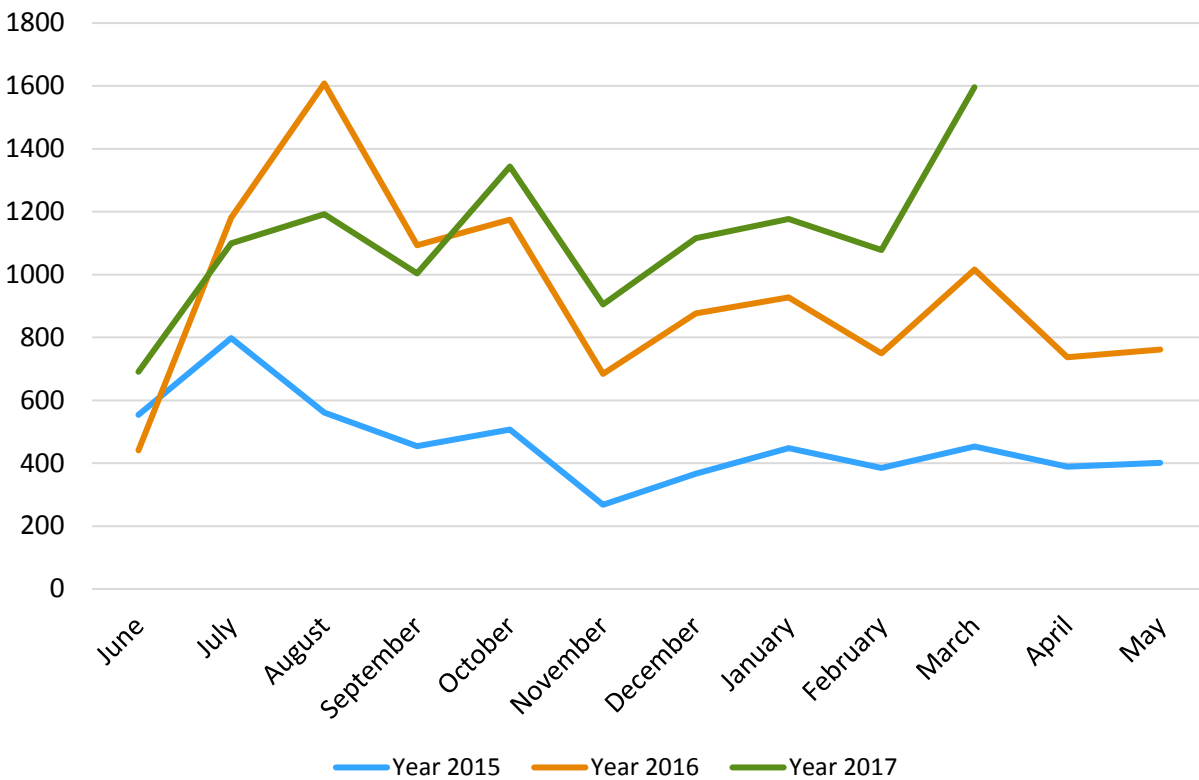


Figure 6. Number of monthly calls handled since program start.

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. Call volume has increased over time: more calls were handled by OMC support center staff in during January-March in 2018 than in previous years.

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