



Medical Cannabis Program Update

OCTOBER 2020

Minnesota’s medical cannabis program began distributing medical cannabis to registered patients on July 1, 2015. This quarterly update reports information collected from July 1, 2015, through September 30, 2020. The data for this update, unless otherwise noted, come from the medical cannabis patient registry system, a secure, web-based application system.

Cannabis Manufacturers

The Minnesota Department of Health (MDH) registered two medical cannabis manufacturers on Dec. 1, 2014. They are responsible for the cultivation, production, and distribution of medical cannabis in the state. The manufacturers are Vireo Health of Minnesota, LLC and LeafLine Labs, LLC.

- Vireo Health operates distribution facilities, or Cannabis Patient Centers (CPCs), in Minneapolis, Rochester, Moorhead, and Bloomington.
- LeafLine Labs operates CPCs in Eagan, St. Cloud, Hibbing, St. Paul, and Willmar.

Figure 1 displays the total number of patient visits to a CPC that resulted in medical cannabis purchases between July 1, 2015, and September 30, 2020. 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.

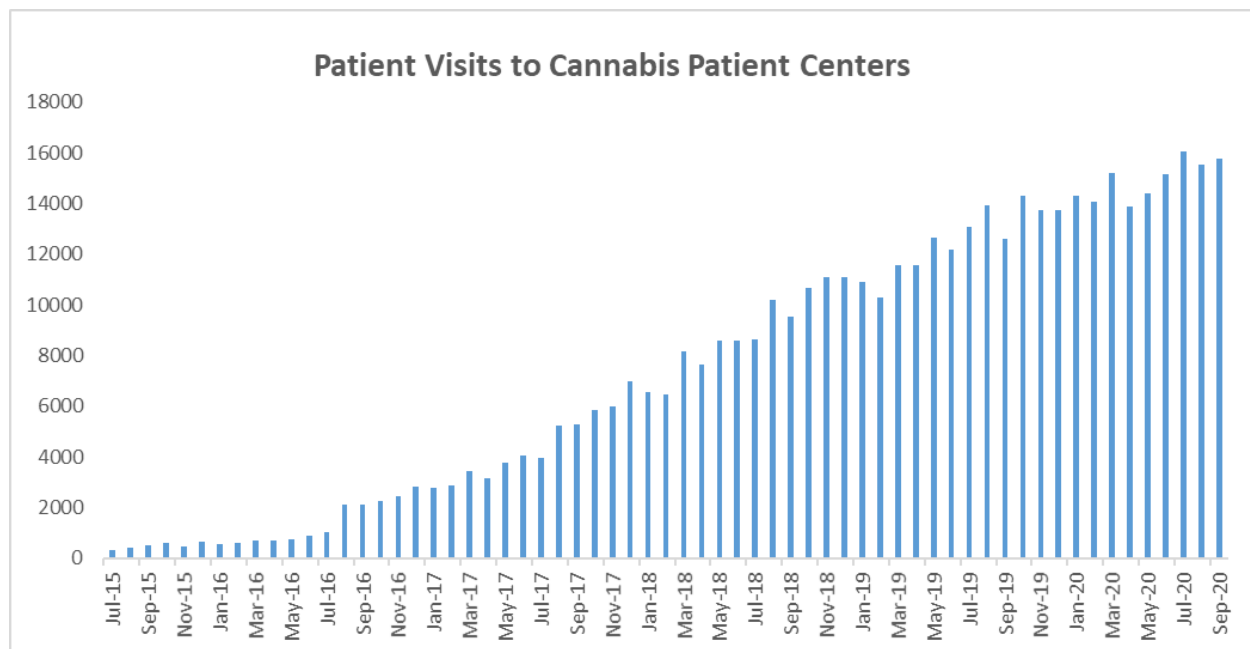


Figure 1. Total number of patient visits to a Cannabis Patient Center that resulted in purchase of medical cannabis products, by month.

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 September 30, 2020, there were 25,356 patients actively enrolled in the patient registry, an increase of 41% (n = 7,395) above the 17,961 who were enrolled as of September 30, 2019. The number of currently enrolled patients this quarter is artificially inflated by Governor’s emergency order 20-26, which extends medical cannabis patient enrollments scheduled to expire beginning March 31, 2020, through 60 days after the end of the COVID-19 public health emergency.

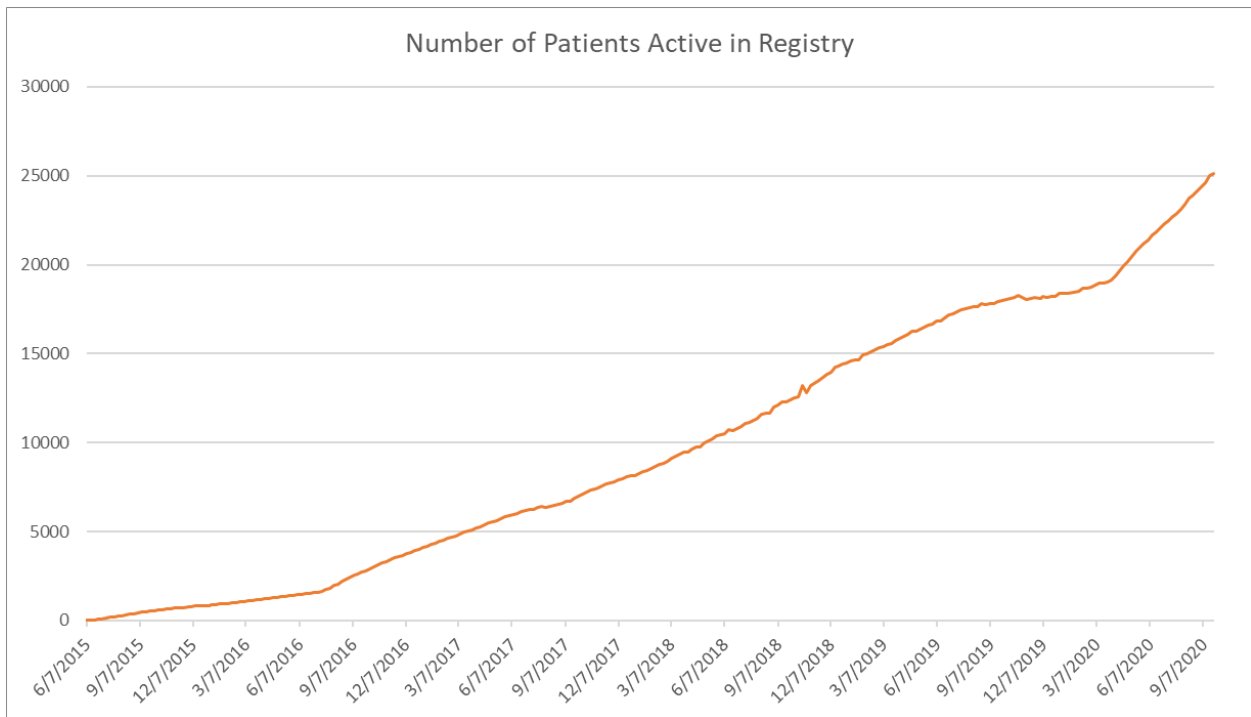


Figure 2. Weekly number of patients enrolled and in active status in registry, as of September 30, 2020.

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 medical assistance, such as Minnesota Care (MN Care), Social Security Disability (SSD) including those transitioned from SSD to retirement, Supplemental Security Income (SSI), Medicaid/Medical Assistance (MA), Railroad Retirement Disability (RRD), and Veterans Disability including VA dependency and indemnity compensation (VA DIC) qualify for a reduced fee of \$50. Figure 3 shows that 52% of patients registered as of September 30, 2020, qualified for the reduced enrollment fee.

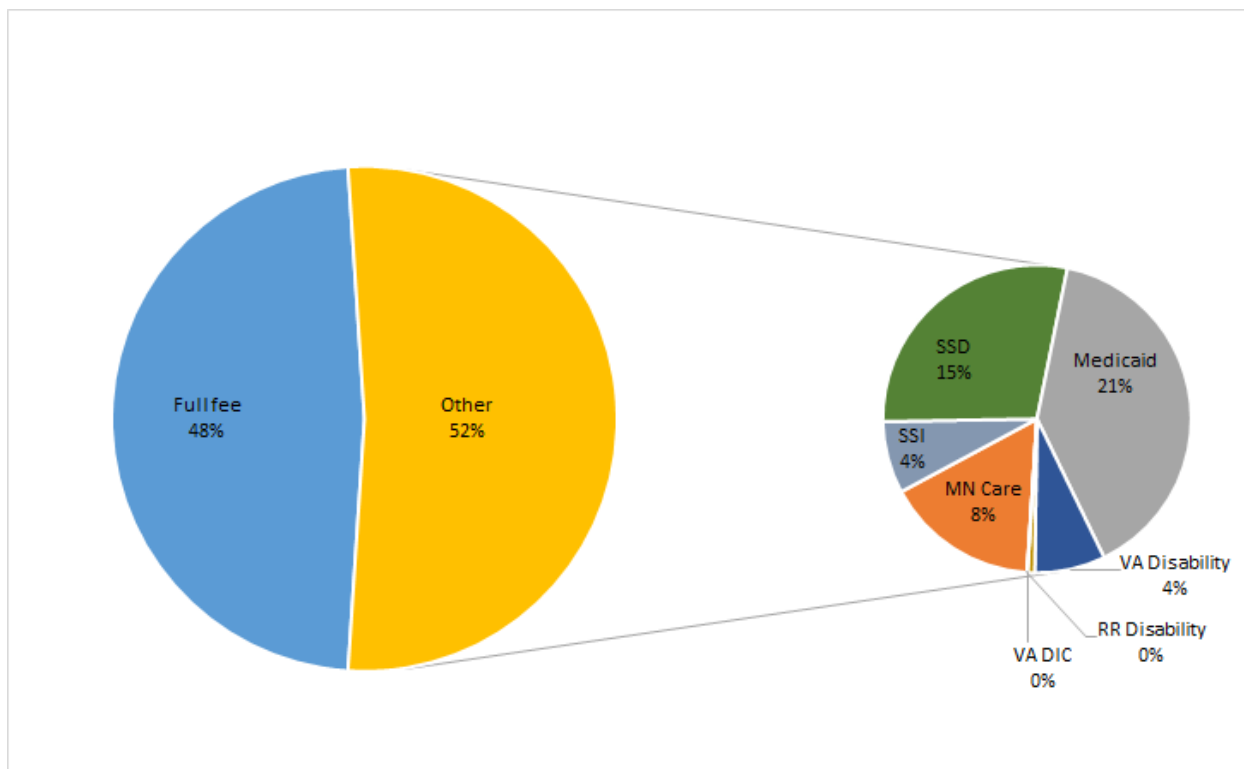


Figure 3. Breakdown of active patients by fee type (reduced vs. full fee) and types of government assistance for reduced fees, as of September 30, 2020.

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

Race/Ethnicity	Medical Cannabis Registry	2014 Census Bureau Estimates*
American Indian	858 (3.4%)	1.9%
Asian	321 (1.3%)	5.0%
Black	1,463 (5.8%)	6.5%
Hawaiian/Pacific Islander	55 (0.2%)	0.1%
White	22,040 (86.9%)	87.5%
Hispanic	774 (3.1%)	4.9%
Other	537 (2.1%)	1.7%

*<http://factfinder.census.gov/faces/nav/jsf/pages/index.xhtml>

The medical conditions that qualify a patient for the medical cannabis program 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)
- Crohn’s Disease was extended to Inflammatory Bowel Disease (including Crohn’s Disease) effective July 1, 2016.

The Commissioner of Health has added the following qualifying medical conditions:

- Intractable Pain, effective Aug. 1, 2016
- Post-Traumatic Stress Disorder (PTSD), effective Aug. 1, 2017
- Autism Spectrum Disorder, effective Aug. 1, 2018
- Obstructive Sleep Apnea, effective Aug. 1, 2018
- Alzheimer’s Disease, effective Aug. 1, 2019.
- Chronic Pain, effective Aug. 1, 2020.

Table 2 shows the number of active patients in the patient registry who have been certified as having that qualifying medical condition. As of September 30, 2020, the three most frequently certified qualifying medical conditions are (1) intractable pain/chronic pain, (2) PTSD, and (3) severe and persistent muscle spasms, including those characteristic of multiple sclerosis.

Table 2: Count (%) of Active Patients by Condition* as of September 30, 2020

Qualifying Condition	Enrolled Patients Certified: N (%)
Intractable Pain	15,599 (62%)
Post-Traumatic Stress Disorder	6,052 (24%)
Severe and Persistent Muscle Spasms	2,858 (12%)
Cancer	1,803 (7%)
Obstructive Sleep Apnea	1,281 (5%)
Seizures	739 (3%)
Inflammatory Bowel Disease, Including Crohn’s Disease	711 (3%)
Autism Spectrum Disorder	623 (2%)
Chronic Pain**	419 (2%)
Glaucoma	174 (1%)
Terminal Illness	156 (1%)

Qualifying Condition	Enrolled Patients Certified: N (%)
Tourette Syndrome	147 (1%)
HIV/AIDS	145 (1%)
ALS	45 (<1%)
Alzheimer’s Disease	40 (<1%)
Total	25,356

**Patients certified total more than 100% because 67.2% of the 25,356 patients are currently certified for more than one condition; this table counts each certified condition.*

***Refers to patients who are certified only for chronic pain (with no additional qualifying conditions).*

Figure 4 displays the number of active patients by age and gender. The average age of registered patients is 48.1 years; however, the average age varies by qualifying medical condition. There are 12,562 active patients who self-identify as female, 12,611 active patients who self-identify as male, and 183 active patients who prefer to not list a gender.

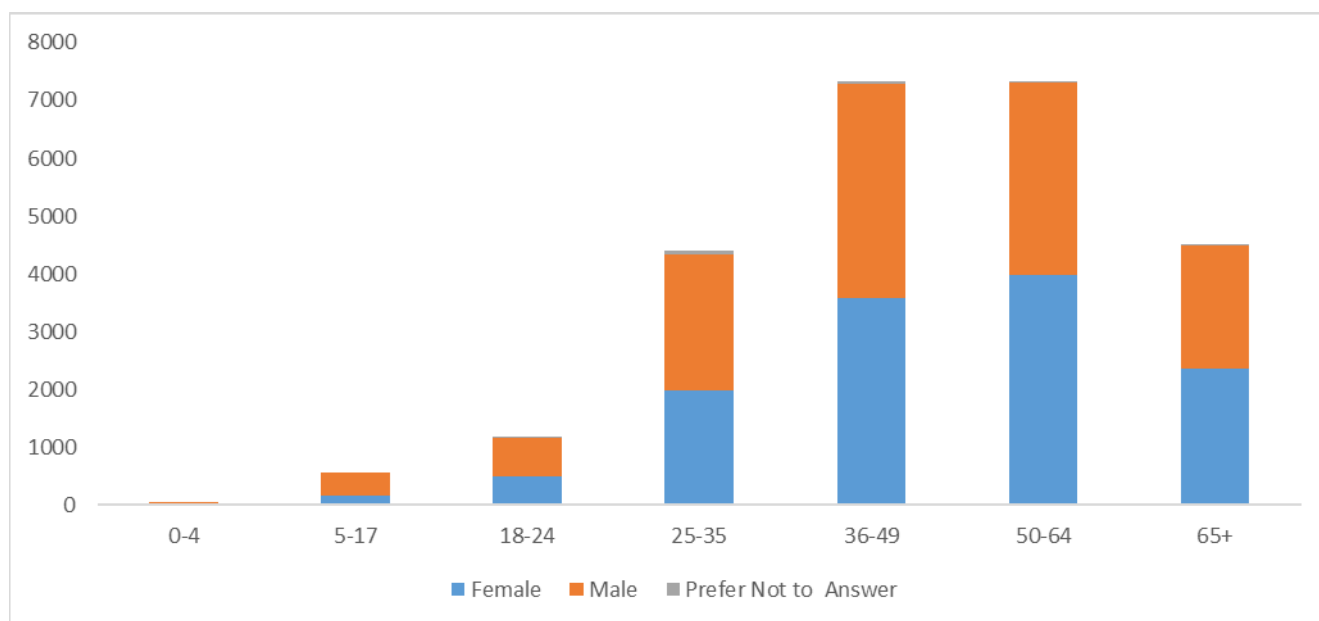


Figure 4. Breakdown of active patients by age and gender, as of September 30, 2020.

Table 3 demonstrates the breakdown of active, condition-specific patient counts by age. Patients certified as having Autism Spectrum Disorder have the lowest average age of 19.1 years; patients with Alzheimer’s disease have the highest average age of 75.2 years.

Table 3: Breakdown of Active Patients by Age Group and Qualifying Medical Condition, as of September 30, 2020.

Age (y)	0-4	5-17	18-24	25-35	36-49	50-64	65+	Mean Age (SD)
All Conditions	41 (<1%)	564 (2%)	1,169 (5%)	4,401 (17%)	7,337 (29%)	7,335 (29%)	4,509 (18%)	48.1 (16.6)
Glaucoma	-	1 (1%)	2 (1%)	12 (8%)	25 (14%)	67 (39%)	67 (39%)	58.9 (14.4)
HIV/AIDS	-	-	3 (2%)	38 (26%)	47 (33%)	50 (35%)	7 (5%)	44.9 (12.0)
Tourette Syndrome	1 (1%)	30 (20%)	36 (25%)	35 (24%)	28 (19%)	10 (7%)	7 (5%)	29.6 (15.5)
ALS	-	-	-	1 (2%)	7 (16%)	21 (47%)	16 (36%)	59.6 (10.6)
Seizures	17 (2%)	117 (16%)	98 (13%)	194(26%)	197 (27%)	81 (11%)	35 (5%)	33.0 (16.4)
Muscle Spasms	2 (<1%)	13 (1%)	117 (4%)	529 (19%)	933 (33%)	881 (31%)	383 (13%)	47.4 (14.5)
Inflammatory Bowel Disease, Including Crohn's Disease	-	2 (<1%)	39 (6%)	172 (24%)	259 (36%)	186 (26%)	53 (7%)	43.9 (13.9)
Cancer	9 (1%)	27 (2%)	26 (1%)	79 (4%)	305 (17%)	684 (38%)	673 (37%)	58.1 (15.4)
Terminal Illness	4 (3%)	3 (2%)	6 (4%)	6 (4%)	22 (14%)	45 (29%)	70 (45%)	58.8 (20.2)
Intractable Pain	2 (<1%)	38 (<1%)	390 (3%)	2,099 (14%)	4,481(29%)	5,255 (34%)	3,334 (21%)	51.7 (15.3)
PTSD	-	61 (1%)	546 (9%)	2,066 (14%)	2,154 (36%)	937 (15%)	288 (5%)	39.1 (12.7)
Autism Spectrum Disorder	11 (2%)	324 (52%)	130 (21%)	100 (16%)	48 (8%)	7 (1%)	3 (<1%)	19.1 (11.3)
Obstructive Sleep Apnea	-	1 (<1%)	9 (1%)	125 (10%)	475 (37%)	484 (38%)	187 (15%)	50.6 (12.1)
Alzheimer’s Disease	-	-	-	-	-	5 (13%)	35 (88%)	75.2 (9.2)
Chronic Pain*	-	3 (1%)	35 (8%)	73 (17%)	144 (34%)	112 (27%)	62 (15%)	46.8 (15.2)

*Refers to patients who are certified only for chronic pain (with no additional qualifying conditions)

Table 4 indicates the majority of enrolled patients come from or near the Minneapolis-St. Paul metropolitan area. Fifteen 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). Twelve percent come from Southern Minnesota (defined as the Rochester, Mankato, Willmar postal codes). Sixty-seven percent of enrolled patients come from the Minneapolis-St. Paul metropolitan area. The remaining 6% come from the St. Cloud region.

Table 4. Approved and active patients, by ZIP code region as of September 30, 2020

Region	ZIP Codes	Active Patients
St Paul	55000-55199	7,211
Minneapolis	55300-55599	9,804
Duluth	55600-55899	1,614
Rochester	55900-55999	1,341
Mankato	56000-56199	897
Willmar	56200-56299	772
St Cloud	56300-56399	1,595
Brainerd	56400-56499	855
Detroit Lakes	56500-56599	646
Bemidji	56600-56699	413
E Grand Forks	56700-56799	199

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, legal guardians, or spouses acting as caregivers. All caregivers must be enrolled in the patient registry system. A patient’s parent, legal guardian, or spouse 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, legal guardians, or spouse 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 requires assistance in administering medical cannabis or obtaining medical cannabis 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/spouses acting as caregiver, by qualifying medical condition, as of September 30, 2020. Prior to July 1, 2019, a patient’s spouse was required to qualify as a

designated caregiver in order to register in the program. After July 1, 2019, a patient’s spouse may register as a spouse-acting-as-caregiver without registering as a designated caregiver. Therefore, a significant number of caregivers who are spouses of patients may still be registered as designated caregivers rather than parents/legal guardians/spouses and would be represented in the middle column of Table 5. Of 2,110 registered parents/legal guardians/spouses acting as caregiver, 1,111 were registered parents/legal guardians and 999 were registered spouses.

Table 5: Active Designated Caregivers and/or Registered Parents/Legal Guardians/Spouses (PLGS) by Condition* as of September 30, 2020

Qualifying Condition	Total Patients	Patient with Registered Caregivers: N (%)	Patients with Registered PLGS: N (%)	Patients with Caregiver and/or PLGS: N (%)
Glaucoma	174	19 (11%)	9 (5%)	26 (15%)
HIV/AIDS	145	8 (6%)	-	8 (6%)
Tourette Syndrome	147	7 (5%)	63 (43%)	67 (46%)
ALS	45	15 (33%)	12 (27%)	26 (58%)
Seizures	739	63 (9%)	303 (41%)	346 (47%)
Severe and Persistent Muscle Spasms	2,858	300 (11%)	214 (8%)	501 (18%)
Inflammatory Bowel Disease, Including Crohn's Disease	711	36 (5%)	50 (7%)	86 (12%)
Cancer	1,803	307 (17%)	308 (17%)	602 (33%)
Terminal Illness	156	49 (31%)	26 (17%)	72 (46%)
Intractable Pain	15,599	1149 (7%)	964 (6%)	2081 (13%)
Post-Traumatic Stress Disorder	6,052	202 (3%)	333 (6%)	523 (9%)
Autism Spectrum Disorder	623	34 (3%)	502 (39%)	509 (40%)
Obstructive Sleep Apnea	1,281	51 (8%)	57 (9%)	107 (17%)
Alzheimer’s Disease	40	19 (48%)	15 (38%)	32 (80%)
Chronic Pain**	419	5 (1%)	31 (7%)	36 (9%)
Total	25,356	1730 (7%)	2,110 (10%)	4065 (16%)

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

**Refers to patients who are certified only for chronic pain (with no additional qualifying conditions)

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, but at a reduced rate.

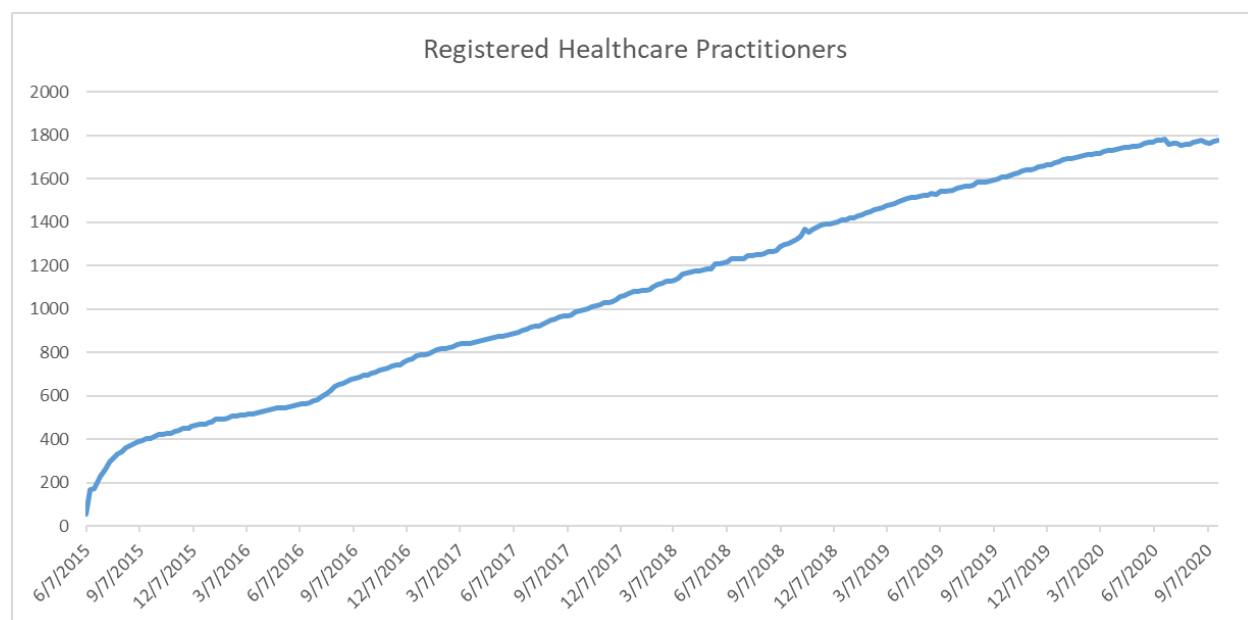


Figure 5. Count of registered health care practitioners actively in the patient registry since the program start, through September 30, 2020.

Table 6 shows that as of September 30, 2020, there were 1,778 health care practitioners approved in the registry system. Of the 1,778 registered practitioners, 1,262 are physicians, 149 are physician assistants, and 371 are APRNs. One year ago, there were 1,612 registered health care practitioners, 1,186 of whom were physicians (74%), 121 of whom were physician assistants (8%), and 305 of whom were APRNs (19%).

Table 6: Breakdown of Registered Health Care Practitioners by Type, as of September 30, 2020

Healthcare Practitioner Type	N (%)
Physician	1,262 (71%)
Physician Assistant	145 (8%)
Advanced Practice RN	371 (21%)
Total	1,778

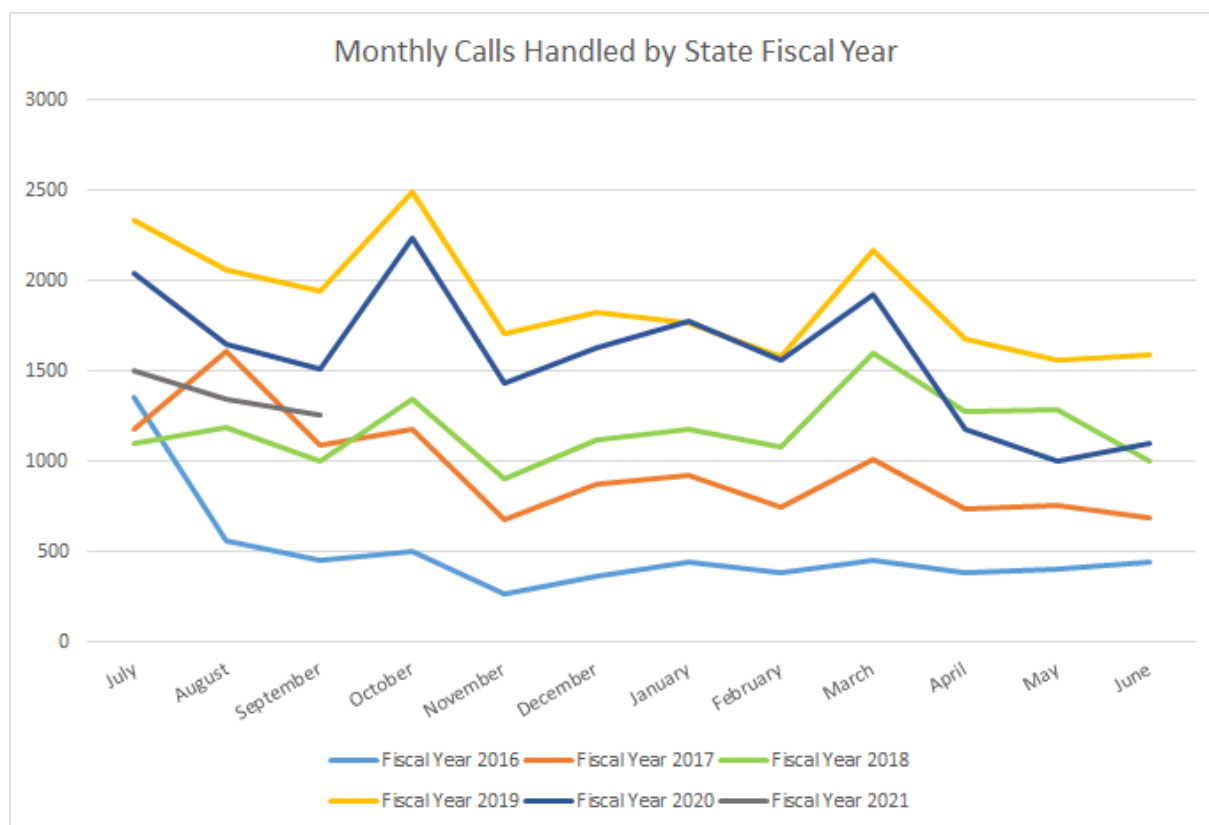


Figure 6. Number of monthly calls handled by OMC staff since program start. The month of July, fiscal year 2016, also includes the calls handled from June when the call center went live.

Activity in the program markedly increased beginning July 1, 2016, when Intractable Pain became a qualifying medical condition. The volume of phone calls received by OMC increased beginning in July 2016. The fiscal year with the highest call volume is FY2019. Fewer calls were handled in fiscal 2020 than in fiscal year 2019. Although the number of enrolled patients has increased, the numbers of calls handled by OMC in the first quarter of fiscal year 2021 remains similar to call volumes in the first quarters of fiscal years 2019 and 2020.

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October 12, 2020

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