



Medical Cannabis Program Update

JANUARY 2021

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 Dec. 31, 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 Blaine, Burnsville, Bloomington, Hermantown, Minneapolis, Moorhead, Rochester, and Woodbury.
- LeafLine Labs operates CPCs in Eagan, Hibbing, St. Cloud, 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 Dec. 31, 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.

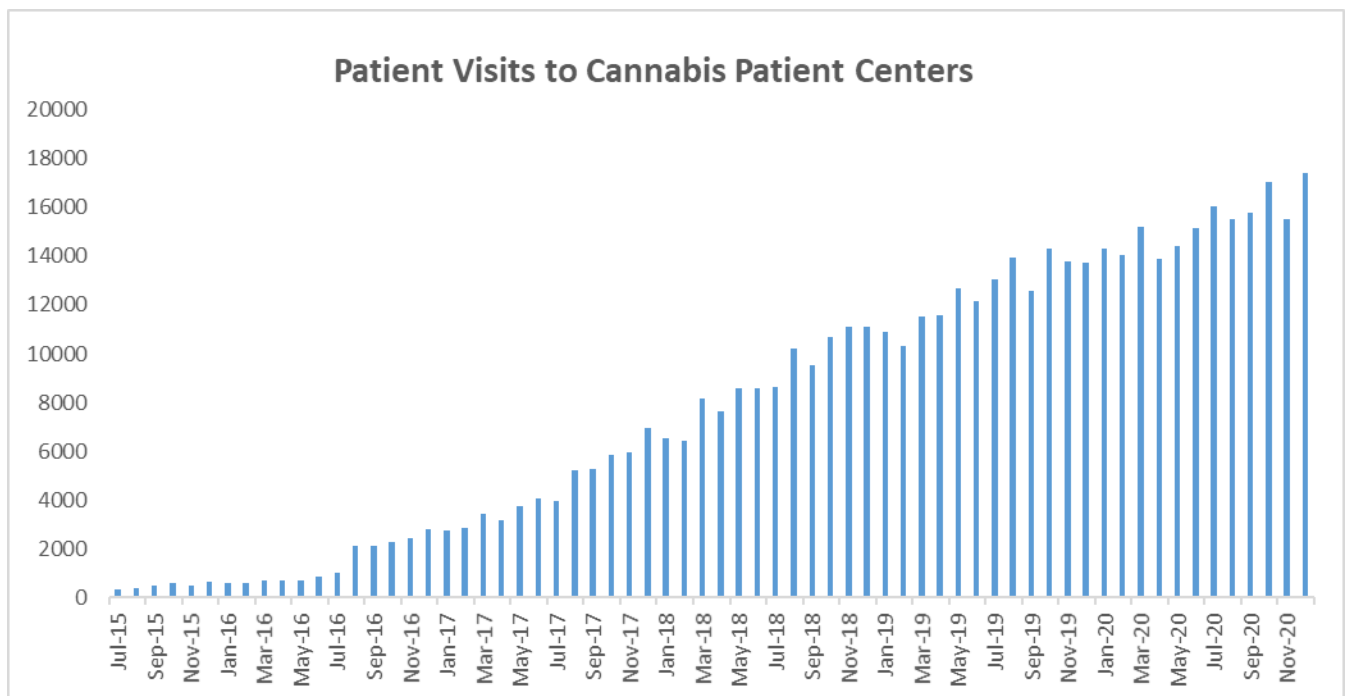


Figure 1. Total number of patient visits to a Cannabis Patient Center that resulted in purchase of medical cannabis products, by month.

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 Dec. 31, 2020, there were 28,522 patients actively enrolled in the patient registry. While this is an increase of 56% (n = 10,273) above the 18,249 who enrolled as of Dec. 31, 2019, it is artificially inflated by the Governor’s emergency executive 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.

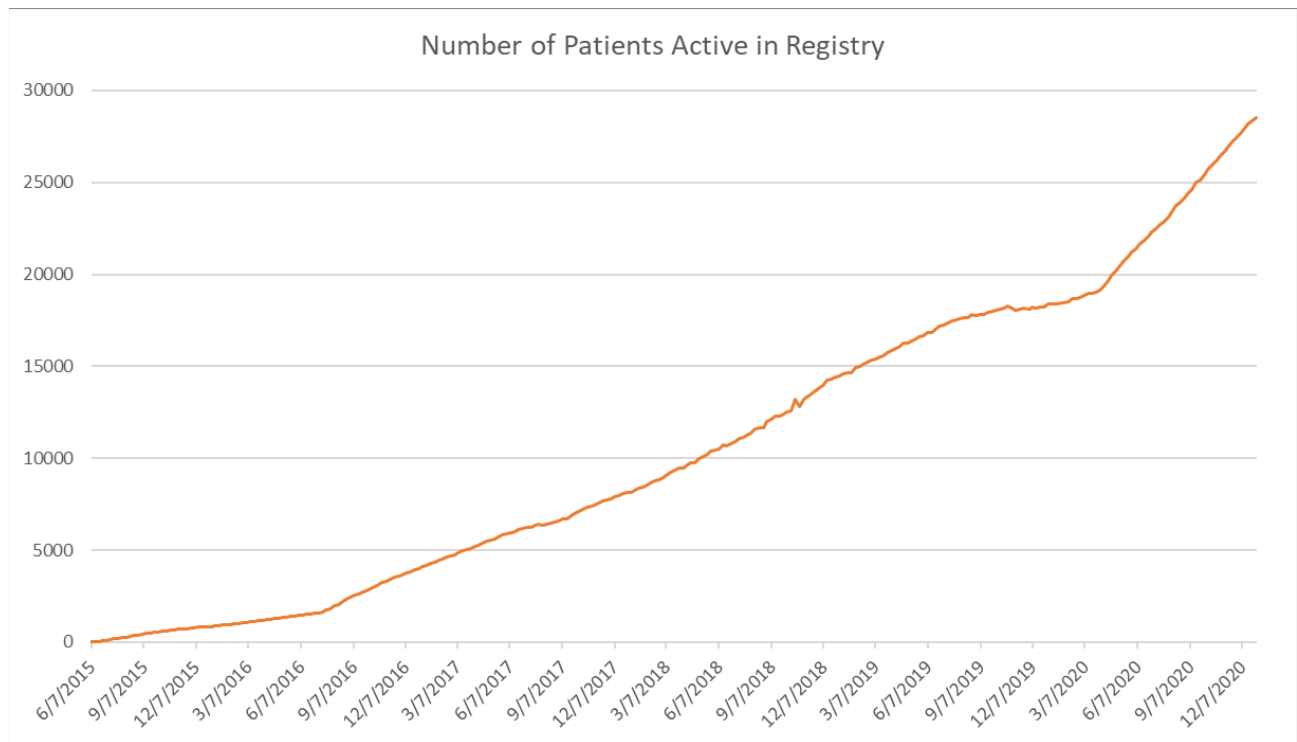


Figure 2. Weekly number of patients enrolled and in active status in registry, as of Dec. 31, 2020.

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 Dec. 31, 2020, qualified for the reduced enrollment fee.

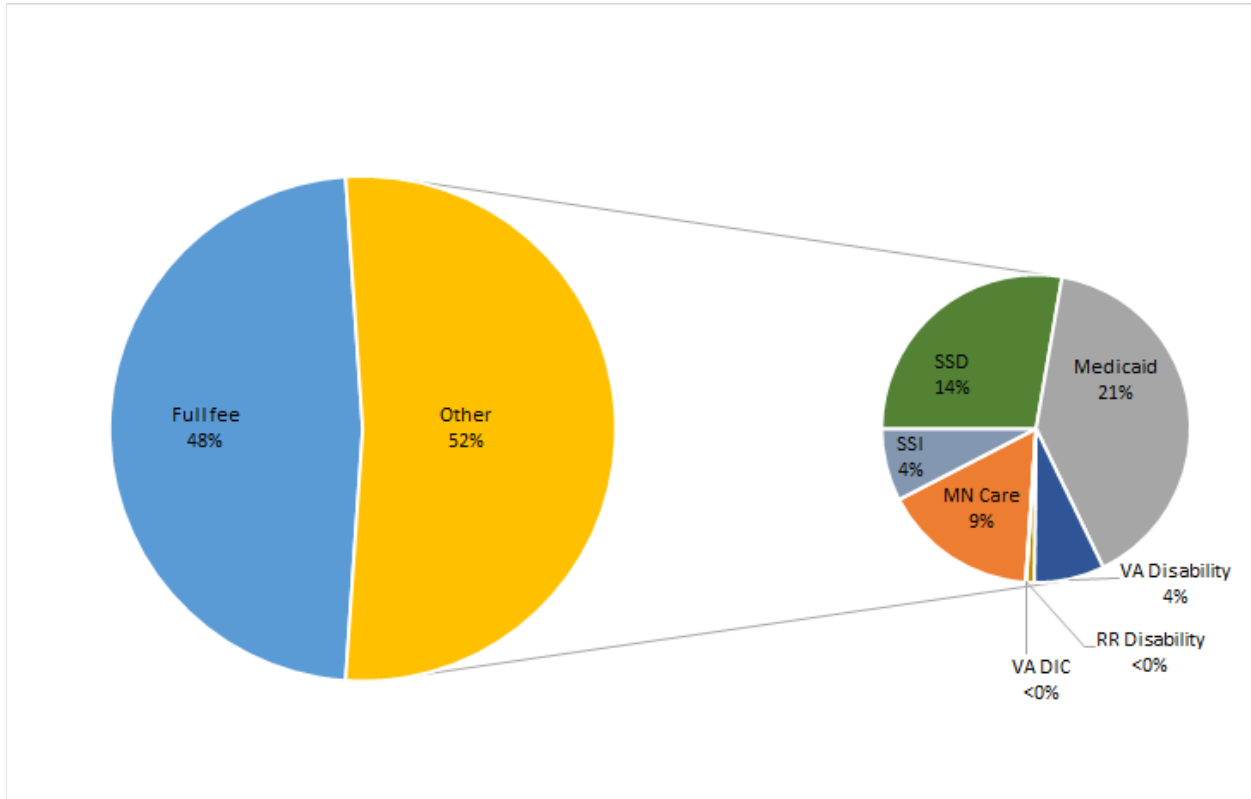


Figure 3. Breakdown of active patients by fee type (reduced vs. full fee) and types of government assistance for reduced fees, as of Dec. 31, 2020.

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	985 (3.4%)	1.9%
Asian	360 (1.3%)	5.0%
Black	1,704 (6.0%)	6.5%
Hawaiian/Pacific Islander	66 (0.2%)	0.1%
White	24,724 (86.7%)	87.5%
Hispanic	917 (3.2%)	4.9%
Other	626 (2.2%)	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 Dec. 31, 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 Dec. 31, 2020

Qualifying Condition	Enrolled Patients Certified: N (%)
Intractable Pain	16,823 (59%)
Post-Traumatic Stress Disorder	7,041 (25%)
Severe and Persistent Muscle Spasms	3,118 (11%)
Cancer	2,015 (7%)
Obstructive Sleep Apnea	1,446 (5%)
Chronic Pain**	1,010 (4%)
Seizures	808 (3%)
Inflammatory Bowel Disease, Including Crohn’s Disease	786 (3%)
Autism Spectrum Disorder	683 (2%)
Glaucoma	193 (1%)

Qualifying Condition	Enrolled Patients Certified: N (%)
Terminal Illness	175 (1%)
HIV/AIDS	167 (1%)
Tourette Syndrome	163 (1%)
ALS	54 (<1%)
Alzheimer’s Disease	51 (<1%)
Total	28,522

**Patients certified total more than 100% because 63.1% of the 28,522 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 14,118 active patients who self-identify as female, 14,191 active patients who self-identify as male, and 213 active patients who prefer to not list a gender.

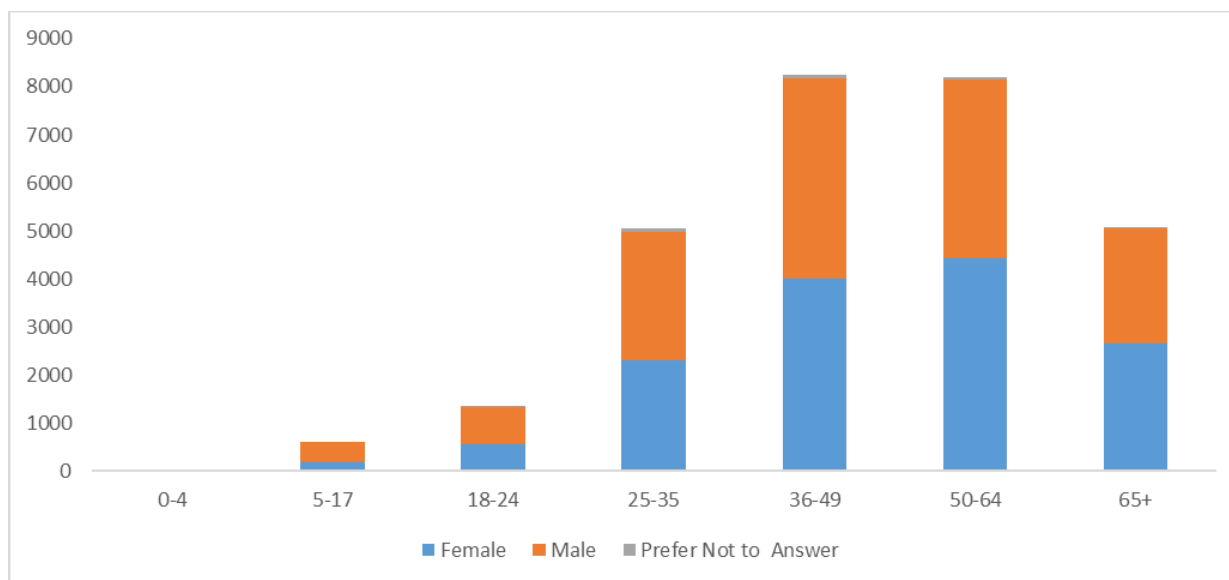


Figure 4. Breakdown of active patients by age and gender, as of Dec. 31, 2020.

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 19.4 years; patients with Alzheimer’s disease have the highest average age of 76.2 years.

Table 3: Breakdown of Active Patients by Age Group and Qualifying Medical Condition, as of Dec. 31, 2020

Age (y)	0-4	5-17	18-24	25-35	36-49	50-64	65+	Mean Age (SD)
All Conditions	35 (<1%)	609 (2%)	1335 (5%)	5042 (18%)	8250(29%)	8186 (29%)	5065 (18%)	48.1 (16.6)
Intractable Pain	2 (<1%)	37 (<1%)	410 (2%)	2264 (13%)	4799 (29%)	5662 (34%)	3649 (22%)	51.8 (15.3)
PTSD	-	63 (1%)	651 (9%)	2405 (34%)	2512 (36%)	1087 (15%)	323 (5%)	39.1 (12.6)
Muscle Spasms	1 (<1%)	15 (1%)	125 (4%)	569 (18%)	1022 (33%)	960 (31%)	426 (14%)	47.5 (14.5)
Cancer	6 (<1%)	31 (2%)	27 (1%)	89 (4%)	349 (17%)	757 (38%)	756 (38%)	58.2 (15.4)
Obstructive Sleep Apnea	-	-	12 (1%)	139 (10%)	542 (37%)	531 (36%)	222 (15%)	50.6 (12.3)
Chronic Pain*	1 (<1%)	5 (1%)	43 (4%)	198 (20%)	314 (31%)	292 (30%)	157 (16%)	47.8 (16.6)
Seizures	14 (2%)	125 (16%)	107 (13%)	209 (26%)	221 (27%)	93 (12%)	39 (5%)	33.6 (16.5)
Inflammatory Bowel Disease	-	2 (<1%)	39 (5%)	191 (24%)	292 (37%)	201 (26%)	61 (8%)	44.0 (13.9)
Autism Spectrum Disorder	10 (2%)	353 (52%)	145 (21%)	106 (16%)	57 (8%)	8 (1%)	4 (1%)	19.4 (11.5)
Glaucoma	-	-	3 (2%)	14 (7%)	30 (15%)	72 (37%)	74 (38%)	58.6 (14.5)
Terminal Illness	4 (2%)	3 (2%)	6 (3%)	7 (4%)	23 (13%)	53 (30%)	79 (45%)	59.4 (20.0)
HIV/AIDS	-	-	3 (2%)	45 (27%)	51 (30%)	61 (37%)	7 (4%)	44.9 (11.8)
Tourette Syndrome	1 (1%)	32 (20%)	39 (24%)	38 (23%)	33 (20%)	12 (7%)	8 (5%)	30.5 (15.6)
ALS	-	-	-	1 (2%)	8 (15%)	26 (48%)	19 (35%)	60.0 (10.1)
Alzheimer's Disease	-	-	-	-	-	6 (11%)	45 (89%)	76.2 (9.6)

*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 ZIP 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 Dec. 31, 2020

Region	ZIP Codes	Active Patients
St Paul	55000-55199	8,014
Minneapolis	55300-55599	10,955
Duluth	55600-55899	1,854
Rochester	55900-55999	1,530
Mankato	56000-56199	1,045
Willmar	56200-56299	873
St Cloud	56300-56399	1,800
Brainerd	56400-56499	946
Detroit Lakes	56500-56599	756
Bemidji	56600-56699	492
E Grand Forks	56700-56799	244

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 Dec. 31, 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 2,786 registered parents/legal guardians/spouses acting as

caregiver, 1,299 were registered parents/legal guardians and 1,487 were registered spouses. In addition, 688 emergency temporary caregivers have been registered under the Governor’s emergency executive order 20-26.

Table 5: Active Designated Caregivers and/or Registered Parents/Legal Guardians/Spouses (PLGS) by Condition* as of Dec. 31, 2020

Qualifying Condition	Total Patients	Patient with Registered Caregivers: N (%)	Patients with Registered PLGS: N (%)	Patients with Caregiver and/or PLGS: N (%)
Intractable Pain	16,823	1250 (7%)	1067 (6%)	2276 (14%)
Post-Traumatic Stress Disorder	7,041	230 (3%)	389 (6%)	603 (9%)
Severe and Persistent Muscle Spasms	3,118	319 (10%)	250 (8%)	552 (18%)
Cancer	2,015	365 (18%)	358 (18%)	706 (35%)
Obstructive Sleep Apnea	1,446	57 (4%)	74 (5%)	130 (9%)
Chronic Pain**	1,010	22 (2%)	85 (8%)	107 (11%)
Seizures	808	69 (9%)	320 (40%)	366 (45%)
Inflammatory Bowel Disease, Including Crohn’s Disease	786	43 (6%)	58 (7%)	100 (13%)
Autism Spectrum Disorder	683	38 (6%)	543 (80%)	550 (81%)
Glaucoma	193	20 (10%)	14 (7%)	32 (17%)
Terminal Illness	175	55 (31%)	29 (17%)	81 (46%)
HIV/AIDS	167	8 (5%)	-	8 (5%)
Tourette Syndrome	163	8 (5%)	66 (41%)	71 (44%)
ALS	54	17 (32%)	14 (26%)	30 (56%)
Alzheimer’s Disease	51	27 (53%)	17 (33%)	42 (82%)
Total	28,522	1,943 (7%)	2,786 (10%)	4,602 (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, or 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.

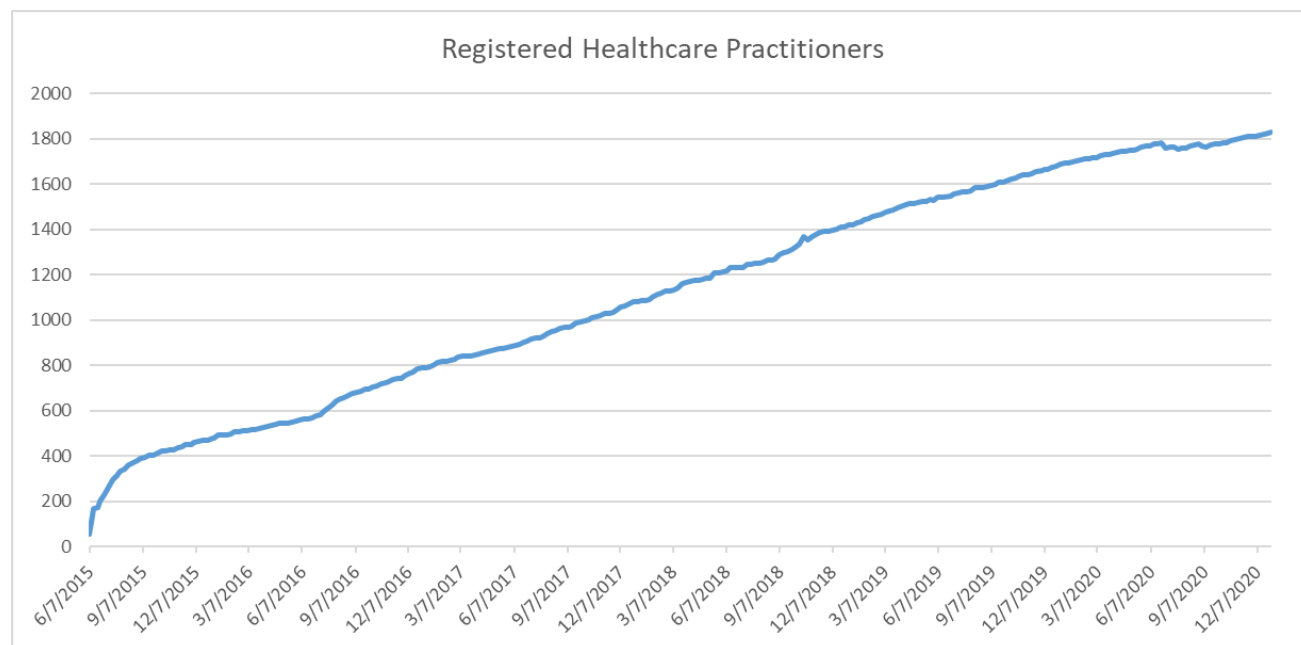


Figure 5. Count of registered health care practitioners active in the patient registry since the program start, through Dec. 31, 2020.

Table 6 shows that as of Dec. 31, 2020, there were 1,831 health care practitioners approved in the registry system, an increase of 9% over the number of registered health care practitioners a year ago. Of the 1,831 registered practitioners, 1,286 are physicians, 151 are physician assistants, and 394 are APRNs. On Dec. 31, 2019, there were 1,681 registered health care practitioners, 1,226 of whom were physicians (73%), 129 of whom were physician assistants (8%), and 326 of whom were APRNs (20%).

Table 6: Breakdown of Registered Health Care Practitioners by Type, as of Dec. 31, 2020

Healthcare Practitioner Type	N (%)
Physician	1,286 (70%)
Physician Assistant	151 (8%)
Advanced Practice RN	394 (22%)
Total	1,831

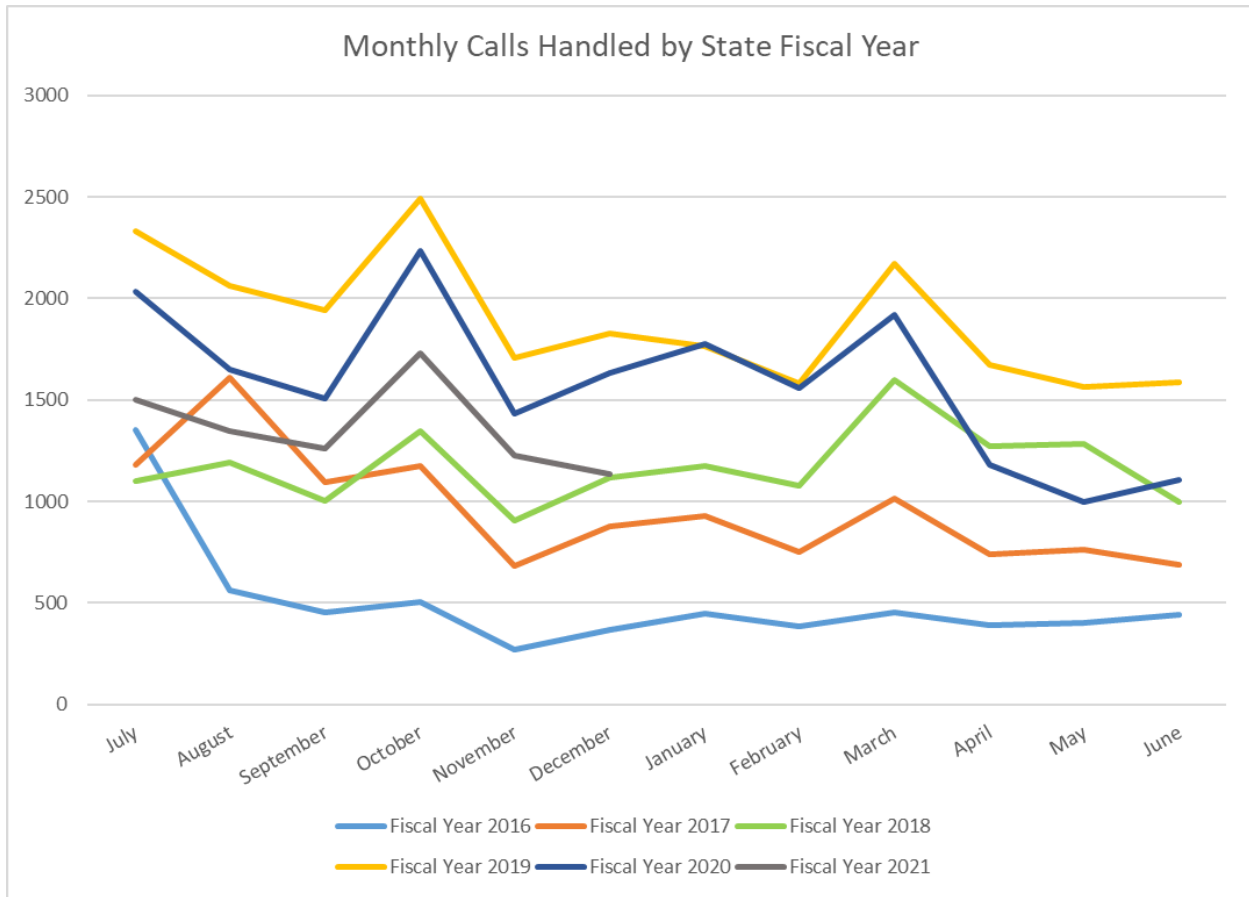


Figure 6. Number of monthly calls handled by OMC staff since program start. The month of July, fiscal year 2016, also includes the calls handled from June when the call center went live.

The number of monthly calls handled by OMC staff grew every year from 2016 to a high in FY2019. For the past two years, however, the call volume has decreased. Call volumes tend to sharply increase in October coinciding with the addition of qualifying conditions.

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