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# Medical Cannabis Patient Priorities with Minnesota's Emerging Adult-Use Market

Exploring what patients value about the medical cannabis program

1/15/2026

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# Introduction

With the emerging adult-use (recreational) cannabis market, and a potential legislative proposal to streamline medical and adult use supply chains, the Office of Cannabis Management (OCM or the office) investigated the top priorities of medical cannabis patients. Minnesota's medical cannabis program has been in existence for more than 10 years, with over 72,000 patients currently enrolled. With adult-use cannabis becoming increasingly available to the public, there could be an impact on the cannabis purchasing experience for medical cannabis program patients. To capture what patients value most about the program, the office distributed a survey to patients and a similar survey to health care practitioners participating in the medical program, and the office analyzed patient purchasing data. More information about these methods is available at the end of this document.

## Medical Patient Priorities

### Patient and health care practitioner feedback

Patients were asked to indicate what factors matter most to them while being part of the medical cannabis program. The most important priorities identified included price, potency of product and product availability, as shown in Figure 1. Patients located in Greater Minnesota, in particular, highlighted shorter driving distance to a dispensary as a priority. Priority online ordering and in-store purchasing were also noted by patients.

**Figure 1: Top priorities of patients during their medical cannabis purchase experience in the program**

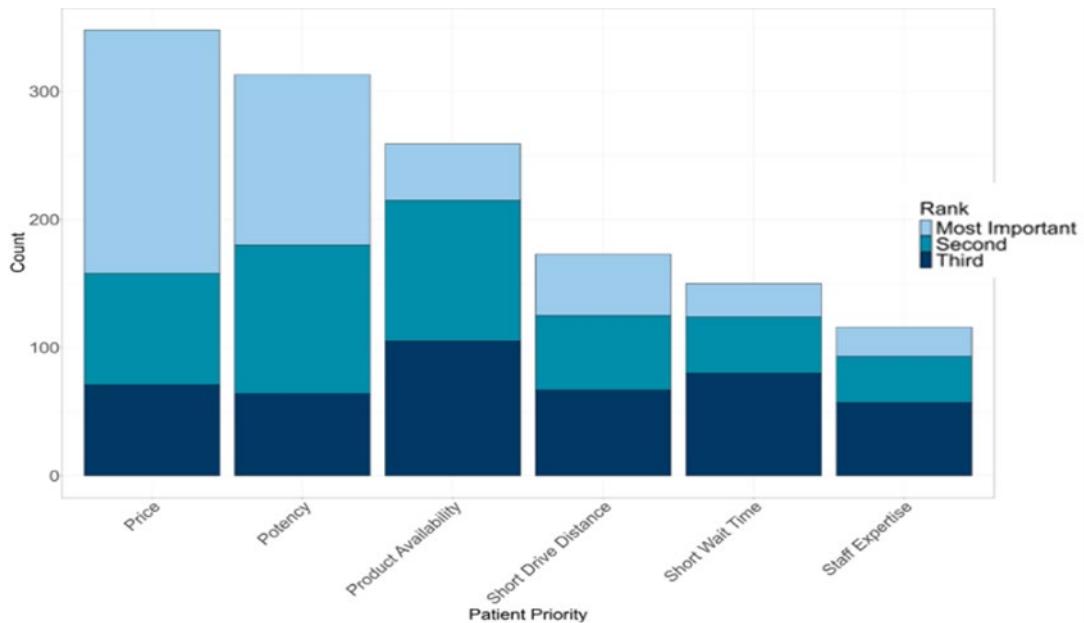
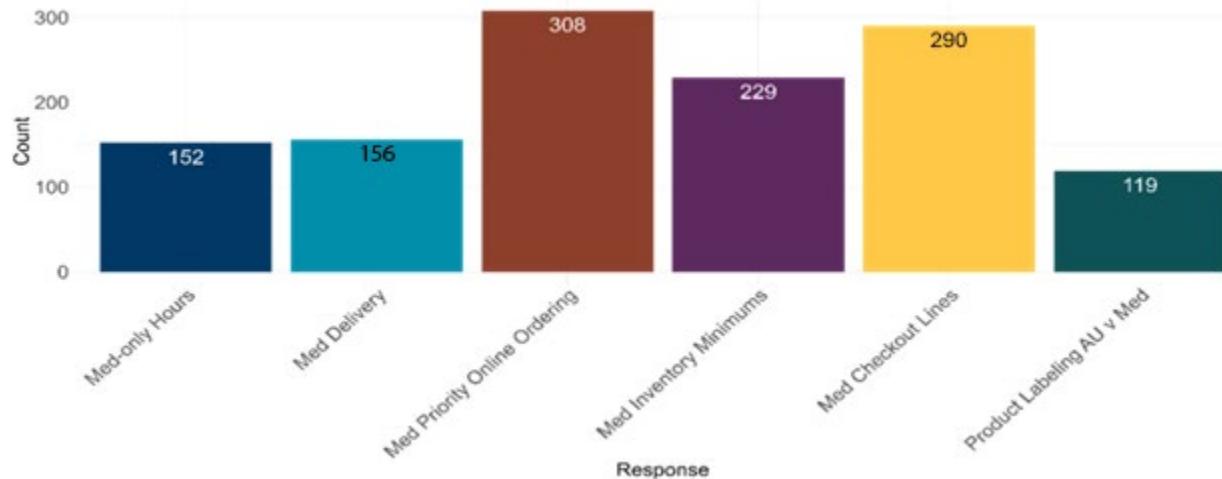


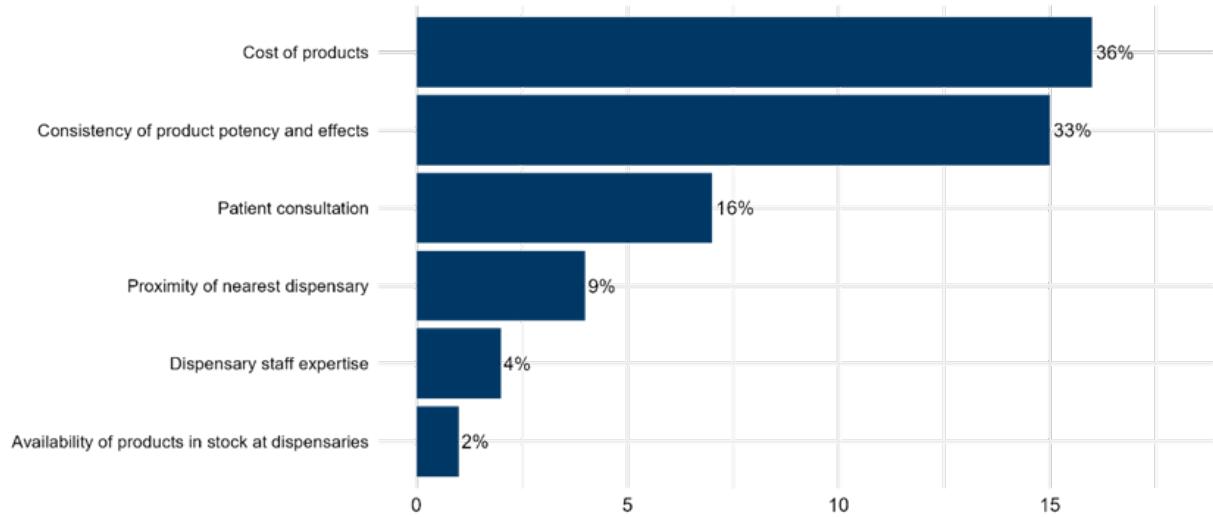
Figure 2 illustrates patients' future hopes for the medical cannabis program, including prioritization of medical online ordering, in-store check-out lines, and the assurance of product availability.

**Figure 2: Patient wishes for the future of the medical cannabis program**



Of the health care practitioners who responded to our survey, one-third perceived that the **costs of products** (36%) or the consistency of **products' potency or effects** (33%) were the most important factors for their patients enrolled in the medical cannabis program, as shown in Figure 3.

**Figure 3: Health care practitioner perception of patient preferences—proportion of health care practitioners who view aspects of the medical cannabis experience as most important to the patient**

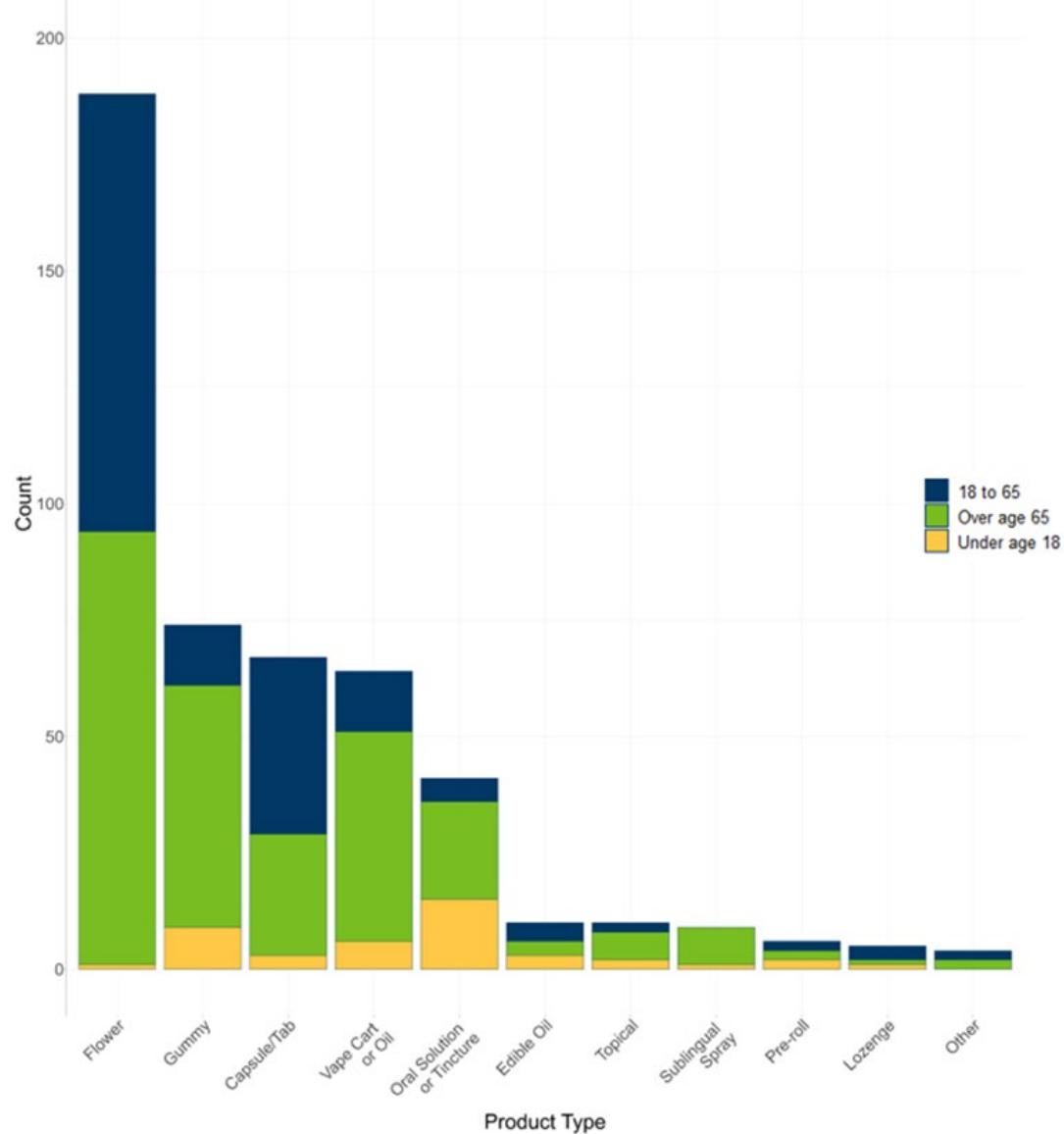


## Product preferences by age of patient

- Overall, flower (39.4%) was the most preferred type of cannabis product available for medical patients, followed by gummies (15.5%), vape cartridges (14.0%) and capsules or tablets (13.4%).
- Patients under age 18 preferred oral solution or tinctures (34.8%) and gummies (20.9%).
- Patients between ages 18 and 65 preferred flower (53.7%) and vapes (21.7%).
- Patients more than 65 years old preferred flower (40.9%) followed by gummies (22.9%) and vapes (11.45%).

The office also asked patients what their second choice of product would be if their first choice was not available. Typically, patients chose a second-choice product type with a similar route of administration to their original first choice pick.

**Figure 4: Number of survey respondents who prefer each product type by age category**

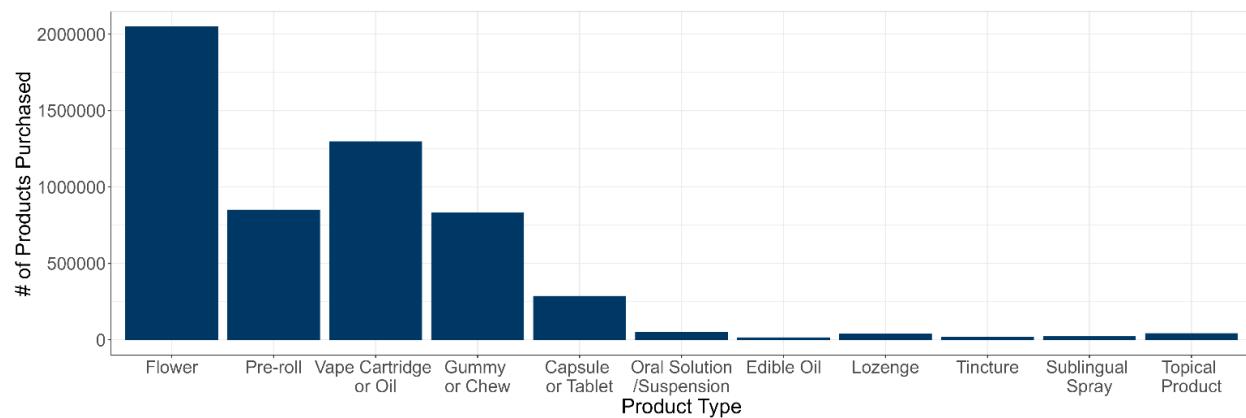


# Medical Cannabis Product Purchasing Trends

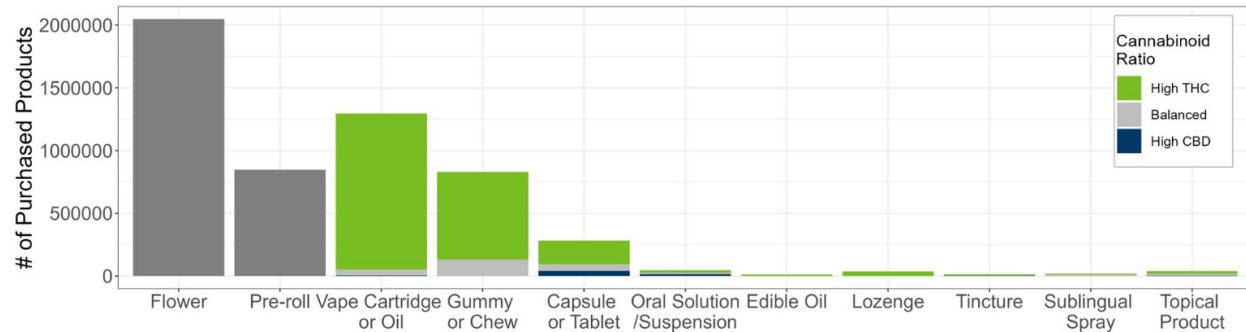
Among all patients, **cannabis flower and preroll products** were the most commonly purchased products, followed by **vape cartridges and oils**, and **edible gummy or chew products** (Figure 5). These purchasing trends match the preferences identified in the patient survey.

When stratified by cannabinoid ratio, **high-THC products** are the most commonly purchased among all product types among all patients (Figure 6). This finding is consistent with previous reports and analyses of adult medical patients by the office. Note: Cannabis flower products' cannabinoid ratio is not calculated in the same way as concentrate products and is not included in the cannabinoid ratio analysis.

**Figure 5: Number of medical cannabis products purchased by product type**



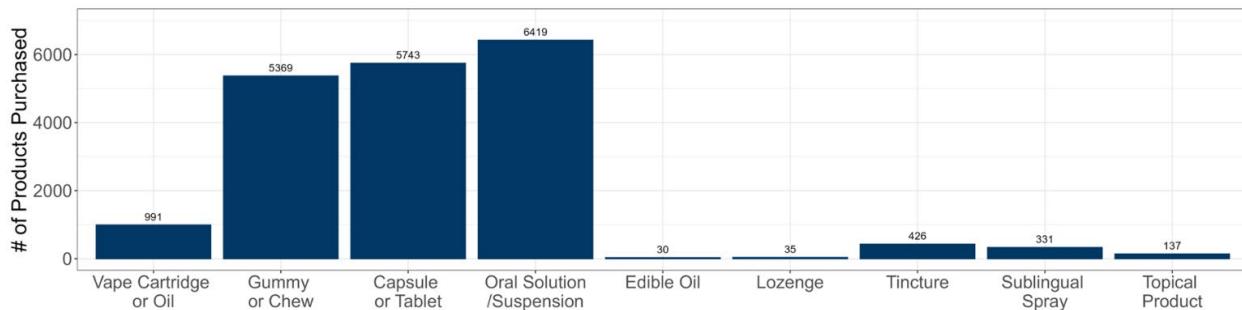
**Figure 6: Number of medical cannabis products purchased by product type stratified by cannabinoid ratio. Cannabis flower products are not categorized by THC:CBD ratio**



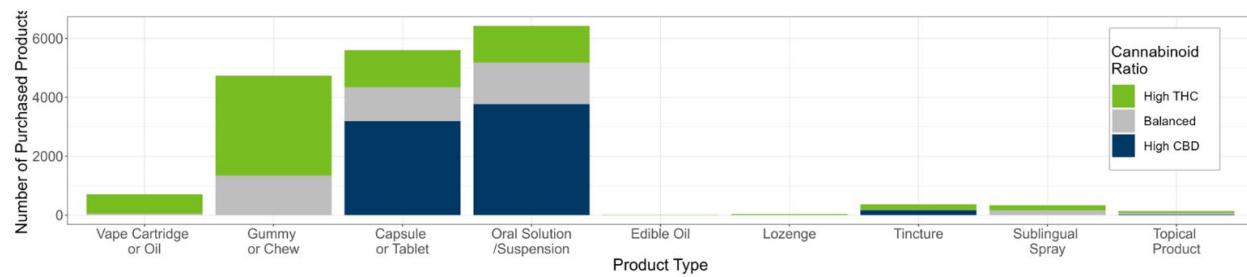
However, product preferences differ among patients under the age of 18. For this age category, the most commonly purchased products include **oral suspensions and solutions, capsules and tablets, and gummies and chews** (Figure 7). Since the medical program includes very young patients (under 2 years of age), it is not surprising that parents are choosing easier-to-administer product types.

In this age category, and when stratified by cannabinoid ratio, **high-CBD products** become the most commonly purchased for capsules and tablets, and oral solutions and suspensions. **High-THC products** are the most commonly purchased for gummy or chew products (Figure 8). Gummies that contain only CBD or are high in CBD are often classified as hemp products and therefore not tracked through the medical cannabis program. Differences in THC and CBD ratios are often related to providing young patients the lowest amount of THC possible (or at least moderated with CBD), while adults may tolerate higher levels of THC. In addition, patients with different medical conditions prefer different ratios of THC in their products to treat a variety of medical symptoms.

**Figure 7: Number of medical cannabis products purchased by patients under age 18 by product type**

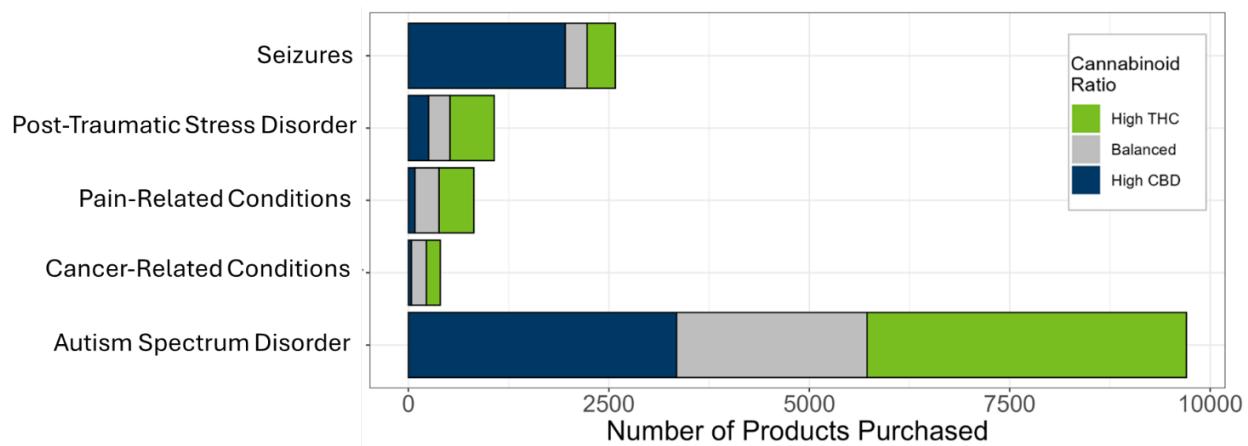


**Figure 8: Number of medical cannabis products purchased by patients under age 18 by product type stratified by cannabinoid ratio**



The office analyzed patients under the age of 18 to investigate cannabinoid ratio of products purchased by qualifying condition. To preserve patient privacy, the office limited analysis to qualifying conditions with more than 10 patients. The most common qualifying condition for patients under the age of 18 was autism spectrum disorder (n = 268), followed by seizures (n = 58), post-traumatic stress disorder (n = 47), pain-related conditions (n = 32), and cancer-related conditions (n = 29). Among these patients, **high-CBD and balanced cannabinoid products** were the most commonly purchased, particularly for patients qualified for seizures (Figure 9).

**Figure 9: Number of medical cannabis products purchased by patients under age 18 by qualifying condition and cannabinoid ratio**

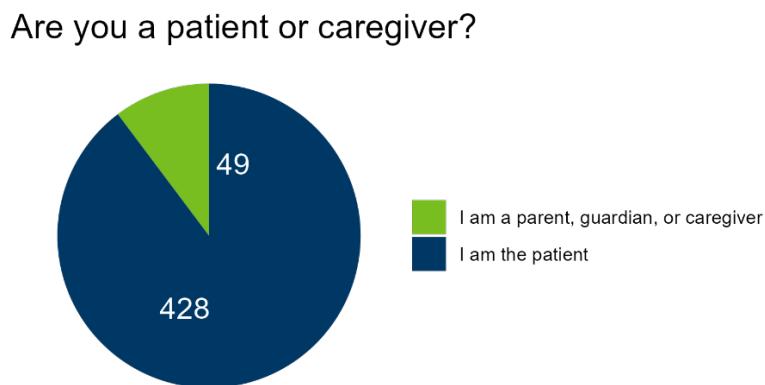


## Methods

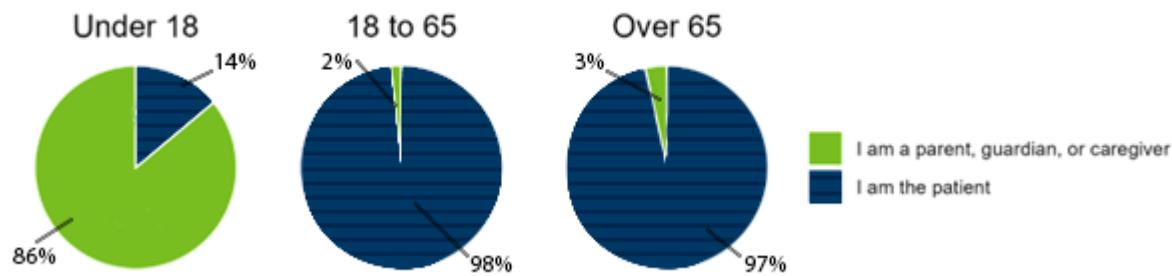
OCM distributed the patient priority feedback form to a random sample of patients (2,399) from three different age groups: patients under 18, age 18-65, and those over 65 years old. Age was determined as age at time of enrollment into the Medical Cannabis Program. The survey was open from September 11-23, 2025, and produced 478 responses—a response rate of 20%.

Most survey respondents were patients (90%), while 10% were caregivers who filled the survey out for the patient (Figure 10). However, when broken down by age categories, for patients under age 18, 86% of the survey respondents were caregivers or parents (Figure 11).

**Figure 10: Proportion of survey respondents by relationship to the patient**



**Figure 11: Proportion of survey respondents' relationship to the patient by age category**



Most respondents reside in Hennepin County (20%) followed by Dakota (10%), Ramsey (7%), and Anoka and Washington (both around 6%) counties (**Figure 10**). The Twin Cities metro area was the most common place of residence, which holds true for the population of the medical program. The northwest, southwest, and northeast region were least represented. Overall, 66 counties across Minnesota were represented by respondents (for comparison, all 87 counties in Minnesota have patients in the medical program).

A survey similar to the patient survey was sent to 1,656 health care practitioners to collect perspectives on how well the medical cannabis program has served their patients and any concerns about the launch of the adult use market. We received 45 responses—a response rate of 2.7%, an acceptable response rates for survey research. Many of the results from this survey are consistent with patient-reported preferences.

Of the health care practitioners that responded to our survey, a majority had three or more years working with patients in the program, meaning they prescribed medical cannabis both before and after adult use was legalized.

The office investigated medical cannabis patient purchasing trends by reviewing both medical cannabis registry data and Metrc cannabis purchasing data between January 1, 2023, and July 31, 2025, for all products. We found 5,476,773 medical cannabis products purchased through 1,596,564 transactions, by 69,328 patients.