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I stumbled into the world of medical cannabis research. I saw a video of an accomplished scientist, trapped in a body frozen by Parkinson's. I always remember his eyes. So full of intelligence and vibrancy, and seemingly desperation. He could not walk, talk, swallow or communicate. I cannot imagine such a fate. Then the video showed him, walking, talking, eating a sandwich and at the end, driving his car. I was mesmerized. What caused this amazing symptom alleviation? Medical cannabis.

I was incredulous, at best. So, I did what I do best, research. I opened an overwhelming trove of clinical research from around the globe and it changed my life. I reached out to my fellow Kansans and began the journey to what is now Bleeding Kansas. So, named by this history geek as a way to honor a proud heritage of compassion and courage that led Kansas to act upon a moral duty. This is how I see the struggle for medical cannabis, our moral duty to our neighbors.

First, please know I want nothing at all and whatsoever to do with the mess that is Colorado and Washington. That is not only bad law, it is bad for patients. We do not wish to be Colorado or Washington, but to only be the best Kansas we can be. These models have priced patients back to the black market. Their model has always been a money first model, even when they were medical only, and not one I would ever want Kansas to emulate.

SB9 is an NFP model, more like California. California has been operating medical since 1996 without any of the insanity. Their movement began with HIV patients but was quickly taken up by hospitals, universities and the medical community. It has always been a patient focused issue.

We are a patient focused group. We are asking that as you consider and review SB9 that you do not throw baby out with bathwater. If there are questions or concerns that we may instead see those as opportunities to start a collaborative dialogue as we work toward building a great law for patients and for Kansas. Kansas patients have waited too long already. We have lost children and adults during this wait. We, frankly, are tired of grieving what we see as needless deaths, filled with needless suffering. Whatever needs to be addressed, let us address it and move toward relief for patients.

I have much more to share with you, in regards to policy and SB9. I also have issues that I would also like to discuss in regards to models and strategies I feel must be addressed in a Kansas cannabis law.

For now, I will let my patients stories speak to you. I will let the medical research speak to you. And I will hope to speak with you soon about all the ways, fiscal included, that I believe SB9 will benefit Kansas patients and Kansas.

Thank you for your time today. We appreciate your listening to the voice of patients.

As part of this testimony, I am submitting compiled medical research. If you have any questions, please feel free to contact me.