

**Substance Abuse Services Commission
Meeting of May 13, 2015
Cross State Office Building Room 400
Augusta, Maine**

ATTENDANCE

Members Present:

Peter McCorison, Provider, Aroostook County, Chair for SASC
Ann Dorney, MD, Physician in Private Practice
Irene Laney, Clinician in Private Practice
Bill Lowenstein, Board of Dir. of Sexual Assault & Response Services (phone)
Scott Gagnon, Prevention, Healthy Androscoggin
Thomas Leonard, School Administrative Leader (phone)
Rep. Richard Malably
Robert Rogers, Kennebec Behavioral Health
Diehl Snyder, MD
Darren Ripley, MAAR
Ann Giggey, Hope House

Members Absent/Excused:

Rep. Adam Goode

Office of Substance Abuse and Mental Health Services:

Geoff Miller, Associate Director, Prevention & Intervention, SAMHS was on vacation. There was no representative from SAMHS at the SASC Meeting.

Guests:

Raya Kouletsis, Coordinator, MAPSA
Mike Savage, Private Practice
Neill Miner, Director, AdCare Maine
Deborah Doiron, Recorder, AdCare Maine

**Substance Abuse Services Commission Meeting
May 13, 2015
Cross State Office Building, Room 400
Augusta, Maine**

MAY MINUTES

DRAFT Date:	May 15, 2015	SASC Approved:	
Signed: Recorded by: Deborah Doiron & Neill Miner AdCare Maine			

Meeting Convened: 9:00 A.M.

Adjourned: 12:00 AM

Meeting Convened: By Peter McCorison

Agenda:

- Introductions and Public Comments, Review of the January, February and March Minutes

New Business:

- SAMHS Update – Geoff Miller, Associate Director
- Legislative Update, Raya Kouletsis, Coordinator, MAPSA
- Review letter on Medicaid Assisted Recovery
- Review Medical Disposal
- Dr. Snyder’s Presentation – Strengthening the Treatment Network
- Scott Gagnon – Marijuana Statement

BREAK 10 Min.

- SASC Goals and Action Plan Review
- SASC and SAMHS – Strengthening the relationship

Old Business:

- Follow-up on outstanding requests for SAMHS response
- Review Active SASC Board Membership Listing
- Prepare Agenda Items for meeting on June 10, 2015

Meeting Adjourned: 12:00

MAY 2015 SASC Meeting Summary

Peter McCorison, Chairperson

Introductions, Public Comment, and Meeting Minutes Review

Peter McCorison welcomed and thanked members and guests for coming to the meeting. Introductions were made. Peter asked if there were any public comments from the community. There were no public comments.

Review of Minutes of Previous Meetings - December, January, February & April

Dr. Diehl Snyder said he read the April minutes and moved to approve, seconded by Scott Gagnon. Peter McCorison asked members who was in favor, opposed. The April minutes were approved. Dr. Snyder said he read the December, January and February minutes and these minutes gave him a sense of what the meetings were about and motioned to approve them. The motion was seconded by Irene Laney. The members voted in favor of the motion; these minutes were approved. Peter also mentioned that about a year ago, the members had decided not to require verbatim minutes, but instead would use a summary format for the SASC meeting minutes.

Agenda additions:

Dr. Diehl Snyder would like to talk about an effort going on by The Downeast Substance Treatment Network in Hancock County. This was added to the discussions under new business.

Scott Gagnon – Marijuana Statement Review

Conclusions or Actions and Responsible Lead Person; timeline if applicable:

Deborah Doiron will forward the approved copies of December, January, February, March & April Minutes to Ann Rogers for posting on the SASC section of the SAMHS site.

NEW BUSINESS - May Agenda

A) SAMHS Update - Geoff Miller, Associate Director, Prevention & Intervention, SAMHS

Topics discussed: Geoff Miller, Associate Director, Prevention & Intervention of SAMHS was on vacation and there was no other person designated to represent SAMHS at the SASC meeting.

Conclusions or Actions and Responsible Lead Person; timeline if applicable:

N/A

B) Dr. Diehl Snyder's Presentation – Strengthening the Downeast Treatment Network, Addressing needs and opportunities in substance treatment services:

Dr. Diehl Snyder introduced himself and distributed copies of his presentation to the members showcasing the Downeast Substance Treatment Network and some of the work they have been doing. This effort is focused on creating a stronger collaboration, sharing of resources, and

enhancement of treatment services provided in several communities across Hancock County. He began the presentation describing the current work underway, the successes and the gaps and challenges. Topics discussed during his presentation were current recommendations; a draft of substance treatment guidelines; training and educational opportunities for providers; addressing the needs and discussion of exploring further opportunities for action; and what kind of next steps could be moved forward. The next Downeast Substance Treatment Network meeting will be held on Monday, June 2, 2015 from 4:30pm – 6:00pm at the Ellsworth City Hall.

Ann Dorney mentioned that Representative Geoffrey Gratwick had approached her and asked if she would be interested in doing a mentoring program in Somerset County in order to expand Suboxone treatment or narcotic addiction resources. She said it would be a good idea to talk with him about what the Downeast Network is currently doing.

Dr. Snyder talked about the primary physicians' resistance to taking the eight hour required course, which would allow them the ability to treat clients with Suboxone. Dr. Snyder stated that in his discussions with these physicians' they do not wish to take on this kind of obligation.

Bill Lowenstein suggested, as a potential resource, to reach out to Vermont, which already has a medical home model called Hub and Spokes and see how this is being funded and how it is operating. Neill Miner indicated that he would send some Vermont contact information to Dr. Snyder. Peter stated that this movement needs to be grassroots, but SAMHS should also be involved with this new model.

Peter stated that in Aroostook County they brought the hub into the AMHC outpatient office and contracted with physicians from Carry and Pine. These physicians come to the office twice a week to see clients and AMHC oversees the clients care and intervention. This makes it less stressful for the physicians. Peter stated that funding is always a big issue.

Bill Lowenstein suggested checking in with SAMHS at the June meeting to see if they are looking into developing similar models.

Peter McCorison mentioned using Vivatrol as another alternative, but stated that managing the detox is challenging when clients use this strategy.

Ann Dorney talked about an ACES study and stated anything that is done with intervention should include screening for ACES.

Dr. Snyder ended his presentation and reiterated when the Networks' next meeting would be held, the time and the location. They will welcome anyone wishing to attend their meeting.

Conclusions or Action and Responsible Lead Person:

Neill Miner, AdCare Maine will collect and provide information to Dr. Snyder on the HUB and Spokes Program currently being used in Vermont.

C) Legislative Update and Report on Marijuana points developed by a Maine Prevention group – Raya Kouletsis, Coordinator, MAPSA – Raya Kouletsis went over the following Legislative LD's:

Raya gave an update on the marijuana bills currently in process. She discussed the votes from the work session on the medical marijuana pieces. She also stated that with respect to the Maine Alliance for the Prevention of Substance Abuse (MAPSA), a key purpose of tracking these bills is to fully grasp how new laws should change the messages that prevention field will need to provide to Maine communities.

Current LD's:

LD 23 – Ought to Pass – This is an Act that would remove the requirement that prescribing in Maine of Marijuana for medicinal purposes must be for patient medical condition that are debilitating. This would significantly increase the availability of medical marijuana to people and increase the need for more caretakers.

LD 266 – Ought Not to Pass – An Act to allow access by law enforcement officers the list of names of registered caregivers.

LD 766 – Ought Not Pass – An Act to require medical marijuana primary caregivers cultivating in a residential building to obtain an electrical permit.

LD – Ought to Pass as Amended – An Act regarding patient information under the Maine Medical Use Marijuana Act

LD – Testing Facilities – An Act to allow the operation of marijuana testing facilities. The dispensaries and the registered primary caregivers may own and operate a marijuana testing facility for research and development purposes. If a label for medical marijuana is used referring to the potency of the cannabis, the label must be verified by a testing facility.

Tabled Bills:

LD regarding An Act on Patient Safety and Maine's Medical Marijuana program

LD regarding An Act to remove the limit on the number of patients as a primary caregiver

LD regarding An Act to amend the Maine Medical Use of Marijuana Act in regards to good business practices

LD – An Act to allow qualifying patients the use medical marijuana in a hospital

LD – An Act to allow qualifying patients the use of medical marijuana on school grounds –

Raya will check on this one to make sure of the status

LD – An Act to permit marijuana cultivation by an incapacitated adult

Upcoming Bills with respect to legalizing recreational marijuana, taxing and regulations:

Rep. Dionne's bill LD 1401 would go to the ballot in 2015

Rep. Russell's bill LD 1380 would go to the ballot in 2016

A group called Legalize Maine wants to legalize recreational marijuana – their stance is to keep everything in the State of Maine. Another group, the Maine Marijuana Policy Project, wants to grow the marijuana business community, mirroring how tobacco is sold to the public.

Raya Kouletsis distributed a three page Summary on LD 1380 to the members.

Discussions:

Scott Gagnon commented on the differences between LD 1401 and LD 1380. In general, Rep. Dionne's Bill is considered more conservative, as opposed to Rep. Russell's Bill. Scott Gagnon states that what seems to be happening is the creation of regulations before the vote has even taken place. Scott feels there should be more discussion of whether or not to legalize recreational marijuana at all.

Peter McCorison also stated his concerns regarding further decriminalization of marijuana. He indicated that the State of Maine already allows possession of one ounce of marijuana, which he considers to be a large amount. Marijuana is now significantly more potent than it used to be and with the use of it in other products, such as creams and edibles, this bill would likely increase the risk of accidental ingestion by children.

Peter McCorison asked the members about next steps for the Commission on recreational marijuana legalization:

It was suggested, if legalized, that marijuana tax and use monies should be allocated to fund treatment modalities and prevention and education efforts. Scott Gagnon then updated the members on some of his research on what is going on in Washington State with regard to regulation. The taxes on marijuana were initially allocated for prevention and education. However, now the State of Washington is legislatively re-routing these monies for use for other things. Scott states that Rep. Dionne's and Rep. Russell's Bills do require that a portion of the tax income from marijuana sales be funneled to a state agency to help address the negative impact of use, but this doesn't mean the funds will always be allocated in this way. Scott stated the State of Colorado has regulations in place, but there is essentially nothing happening at the State level regarding prevention and education projects.

Mike Savage, a member of the public, stated that regardless of what happens concerning the legalization of marijuana for recreational or medical purposes, work will need to work on two levels. The State and Legislature needs to concentrate on regulations, specifically with regards to marijuana edibles. In addition, there needs to be a way to measure a safe level and how can you ensure the appropriate amount is consumed? Scott Gagnon mentioned that Colorado created regulations for this and the results are they are not working like they should. Peter McCorison agreed with Mike Savage that the State needs to have this on their radar and be defining regulations, before this officially becomes legislation.

Tom Leonard stated that he has concerns about caregivers who use the product themselves. He feels these people need more regulation.

Peter also mentioned the Commission has written a marijuana draft statement to be reviewed at this meeting. SASC has made a request of SAMHS to do a comprehensive assessment of potential cost benefits regarding further decriminalization of marijuana and regulations of edibles.

Rep. Richard Malaby provided an update on the Drug Courts. He stated the legislature placed additional money in the budget to cover a grant that is scheduled to end in October, which supports the Drug Courts. He believes it was in the amount of \$200,000.00 or \$300,000.00, but as yet doesn't know if it will be approved. The Judiciary has approved two more judges to be involved with Drug Court. Rep. Malaby also mentioned the City of Bangor is trying to decentralize the methadone clinic services, by trying to encourage movement out into the community via other options for services. He stated that Rep. Goode moved a bill forward to ask to have a Drug Court located in Bangor. He believes Drug Courts are effective when they have an effective team. In 2011 this was defunded, because of lack of proven success and a need to cut costs in the State budget. Rep. Malaby stated they would like to revisit having a Drug Court again in the Bangor area, if new judges are approved in this budget. Bill Lowenstein mentioned one of the difficulties with Drug Courts is that opioids are the major cause of criminal activity and Drug Courts do not accept methadone clients into the program. Bill stated there are currently regular Drug Courts and a Veteran's Drug Court in operation. He asked if it would make sense to establish an Opioid Drug Court to cover this population.

BREAK 10 minutes

Marijuana Points - Draft Statement on the Public Health & Social Costs of Legalizing Recreational Marijuana in Maine for consideration on LD #1380 – Scott Gagnon:

The SASC members discussed the draft and offered the following suggestions and amendments to the statement:

- 1) Place more emphasis on pregnant women and their unborn babies.
- 2) Address the risks the edibles and creams pose; note that these products increase access to children and youth; the State needs to manage and regulate these edibles;
- 3) This should be a strong statement of concerns regarding the legalization of recreational marijuana and that if recreational marijuana is legalized, there is a need for the State to create appropriate regulations and require that the tax dollars be used by SAMHS only and not used for any other purpose or by any other agency;
- 4) Need unbiased information from data collected from SAMHS; develop a cost analysis;
- 5) Peter suggested adding to the statement about the Commission's uncertainties. The SASC could state that because of the lack of data of potential outcomes and the cost, now is not the time to further decriminalize marijuana and marijuana related products;
- 6) Concerns about industry marketing these products, if this bill passes;

Peter McCorison asked for a volunteer to revamp the marijuana statement. Scott Gagnon volunteered to do this. Irene Laney moved that Scott Gagnon make revisions and get this document out by next week. This move was seconded by Ann Giggey. The Commission will look to updating the draft, add a paragraph regarding the potential reasons not to legalize, based on lack of regulations to manage it. The Commission will also include a copy of its request to SAMHS to do a comprehensive assessment on the potential costs of further decriminalization and send copies to the Commissioner of DHHS, the Governor, Public Safety, HHS and SAMHS. SAMHS would be sending this document out on the SASC's behalf. Peter asked the members if they were in favor of moving this forward; none opposed; abstentions – two members: Irene Laney and Rob Rogers. Based on the number of members present the motion was officially passed. The document will also be sent out with edits for feedback.

Conclusions or Actions and Responsible Lead Person; timeline if applicable:

Scott Gagnon will rework the marijuana statement. Copies will be sent to Public Safety, HHS Subcommittee, and the Commissioner of DHHS and the Governor.

D) Review Letter on Medicaid Assisted Recovery – Peter asked members if they were in agreement with sending out the letter after making one language change from Medicaid Assisted Treatment to Medicaid Assisted Recovery. Ann Giggey moved to forward and this was seconded by Scott Gagnon. Peter asked number of members in favor; there were no oppositions or abstentions. Motion was approved and it was agreed the letter would be sent to SAMHS, HHS, Mary Mayhew, Commissioner, DHHS and the Governor.

Conclusions or Actions and Responsible Lead Person; timeline if applicable:

Peter McCorison will send out the Medicaid Assisted Recovery letter to the above designated individuals.

E) Review Medical Disposal:

Ann Dorney stated the Sheriff’s Association has decided to do the take backs. Scott Gagnon said the pharmacies can now set up their own program under the new DEA rules, but he is not sure if anyone has done this yet. Rob Roberts brought up incineration & storage issues. Ann Dorney mentioned an Article on data regarding the different kinds of take back medicines. Scott mentioned that his agency had some students from Bates College working on their take backs, helping to analyze the amount of controlled medicines that are gathered. They have gathered approximately 5 or 6 years worth of this data. Once this data is analyzed, Scott will be able to share this information with the members.

Conclusions or Actions and Responsible Lead Person:

N/A

F) SASC Goals and Action Plan Review

Discussions:

Peter McCorison stated that the Commission had received feedback that members had maybe set too many goals to accomplish and it was recommended that members identify the goals which they felt were the most important ones. The following list was created:

- 1) Substance Abuse Services in jails and prisons, discharge planning; **Monitor**
- 2) Impact of substance abuse on university college campuses and higher education and workforce development in Maine - **Monitor**
- 3) Access to Medicaid Assisted Recovery - **Primary**
- 4) Medication Destruction - **Monitor**
- 5) Engaging Maine Medical Association around prescribing practices - **Primary**
- 6) Recovery - **Primary**
- 7) E-cigarettes and Healthy Maine Partnership - **Monitor; get additional information**
- 8) Marijuana - **Primary**

It was decided that the Commission’s primary items of concern will be numbers 3, 5, 6, 8.

Dr. Snyder mentioned a grant that his organization wanted to apply for regarding the training of first responders in the use of injectable Narloxone. It wasn't clear as to whether or not his organization would be eligible to apply for this grant. Ann Dorney reported that she remembered that the bill that passed did not stipulate any specific administration process that is needed to be followed for Narloxone. Peter McCorison said the Commission should request clarification from SAMHS on this from Geoff Miller, Associate Director.

Conclusions or Actions and Responsible Lead Person:

- Peter McCorison will make a request for clarification on the bill concerning Narloxone from Geoff Miller, Associate Director, SAMHS.

G) SASC and SAMHS – Strengthening the relationship:

The Commission members discussed the current connections between the SASC and SAMHS. Peter said that he would contact Sheldon Wheeler, Acting Director of SAMHS and set up a meeting to discuss the Commission members' relationship. This meeting will take place before the next Commission meeting in June. It was decided that Peter McCorison, Bill Lowenstein and Scott Gagnon would represent the SASC at this meeting.

Conclusions or Actions and Responsible Lead Person; timeline if applicable:

Peter McCorison will set up a meeting with Sheldon Wheeler before the next meeting in June.

OLD BUSINESS:

H) Follow-up on outstanding requests for SAMHS response:

Peter McCorison reported that he sent out another letter last week to Geoff Miller, Associate Director and Sheldon Wheeler, Acting Director of SAMHS regarding outstanding requests the Commission had previously requested from SAMHS. The Commission has not received any response as yet. Peter McCorison will send the final copy to Deb Doiron and she will distribute copies to the members.

Conclusions or Actions and Responsible Lead Person:

Peter McCorison will send the final copy of the outstanding requests letter to Deb Doiron and she will forward to the Commission members.

I) Review Active SASC Board Membership Listing:

A draft list of the Active Commission Members was distributed to the members. Peter McCorison will reach out to the Governor's Office regarding the status of new members.

Conclusions or Actions and Responsible Lead Person:

Peter McCorison will initiate contact with the Governor's office.

K) Prepare Agenda Items for meeting on June 10, 2015

Scott Gagnon said he would be able to find a person to come in and speak with the members regarding e-cigarettes for June's meeting.

Mike Savage – Presentation on AA Recovery and Outreach

Next Meeting Location:

Wednesday, June 10, 2015

Cross State Office Building, Room 400

9:00 AM to 12:00 Noon

Meeting Adjourned: 12:00