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Note: Word choice and spellings have been retained as written by respondent to avoid inadvertent mischaracterization of intent. Brackets have been used to explain words redacted to prevent individual identification or for other reasons.

- This did give her great benefit and relief of her symptoms.
- Discontinued use due to price and caring for ill mother
- Better understanding of the different levels of THC and CBD.
- This patient is deaf and partially blind and we were not able to communicate with her. We've tried communicating via email but were unable to get a response.
- in hospice care. had not been using due to price. did not find much relief because she was very ill after getting certified.
- cost appears to be the biggest barrier for patients
- Patient only used medical cannabis for one month and stopped using it because she felt it wasn't working for her.
- Patient states that he only went to the dispensary twice but did not continue to get medical cannabis because he did not like the psychoactive effects from the THC.
- no she thought the [MANUFACTURER] pharmacist was very knowledgeable
- [PATIENT] really enjoys meeting the pharmacists and the dispensary but she would like to see other alternatives, besides the oils. Possibly topical or other routes.
- The doses provided were not effective, the electronic device provided was of poor quality, and the drug was too expensive. The program would benefit from better quality control, more thoughtful dosing, and increased competition to make the cannabis more affordable. The program seems to have little clinical utility and seems more like a "novelty" than a serious attempt to deal with the pain crisis we are facing. I would like the program to continue, but it is hamstrung by our inability to conduct meaningful research in this space.
- None. Besides the cost
- Has always had issues with oral medications, would prefer cream for her pain and not have to deal with the upset stomach. Felt rushed at her appointment in [CANNABIS PATIENT CENTER], but felt that her concerns were not addressed accordingly. Has not used since, but may reconsider since she heard that cannabis helps with inflammation. Would like to go back again and meet with a pharmacist again.
- I am unclear why [HIGH CBD PRODUCT] is not offered to more pain patients
- Expense continues to be a concern.
- Cost needs to decrease for many patients.

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- the distribution center that she used in [CITY] at the time was very unprofessional and she was uncomfortable with the care she got there from the pharmacist. this was some time ago now so I'm not sure if they have since improved things.
- Patient stated that she only went to a dispensary 2 or 3 times and she did not find the cannabis to be helping her at all so she hasn't been back since.
- Patient may try cannabis again in August when the topical form becomes available.
- Pills dont work and knock him out.  
Better form,, and smaller dose in pills, so can take a smaller dose  
Less expensive.  
Smoke it
- Patients need additional education on the THC/CBD spectrum, they are often unaware of what the different formulations mean or how they differ.
- No I think the program runs well. I must admit I am not completely convinced on the benefit of medical cannabis
- I wish I could de-certify a patient, such as this patient, when its decided to no longer use cannabis. While this was a mutually agreed decision, I can imagine a scenario where I would like to discontinue a patient who may not agree and I have no way of doing so.
- It would be helpful to see if the patient is following through with medical cannabis via a tracking mechanism on this website
- in the medical world, when a primary care provider refers to another provider, receiving a copy of the documentation (updates on progress) is extremely important. something to consider.
- Cost continues to be a concern.
- The pricing has been an issue with patients participating in the program.
- Medical cannabis is on hold for the patient at this time due to cost, he cannot afford to continue to try it at this point. Unsure if he will resume and try again in the future or not.
- Too costly, he will likely not continue.
- I think continuing to support each individual as an individual is very important. This particular patient spent many hours and dollars advocating for herself to have a potent enough strain to control her complex symptomatology. The antics of the company that was providing her with the initial cannabis was quite frustrating as she clearly had knowledge and experience with strains that were much more potent than anything that was available in Minnesota.
- Advertise the vape form as a short-acting cannabis, while oil and pill as more long-acting.
- Better way to evaluate which dosage will work better, rather than doing it on your own. It's difficult and patients are not educated enough about cannabis to use. Spent a lot of money going back and forth.
- Bring down the cost!!
- This patient isn't going to be able to continued regular use - has concerns about cost.

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- The main barrier for most patients is cost. Some form of medical assistance would be helpful if feasible.
- too costly, not covered by work comp
- Reduce cost. Currently, the program is unjust in that patients w/o significant disposable income are unable to purchase it.
- too expensive
- Has missed it for last 2 months because of cost
- Price continues to be the primary obstacle for many patients, as most are on disability payments.
- Patient would like to see topical applications as a delivery method and more warning labels on medical cannabis bottles.
- would like information about how often pt getting refills/actual use
- Difficult for a patient to obtain when traveling
- Improved subsidies for disabled people
- Decrease cost if possible.
- More education with facilities
- This patient would welcome a topical CBD for use during her work hours. (She works from home.)
- Ckiser facukuty  
LESS EXPENSIVE
- Stop because too expensive even though it helped a lot with sleep and pain.
- Cost
- Reduce cost, make more affordable for patients.
- Patient would like to see [MANUFACTURER] have pill form.
- Patient would like to see price reduction or insurance coverage.
- Patient says that he would be very sad if Minnesota's medical cannabis program was taken away.
- Patient would like to see some diversity in product variations.
- Patient states that the program is cost ineffective, and would like to see insurance cover medication.
- Patient reports that her pain clinic does not support her use.
- be able to transfer a small amount from state to state
- get Medicaid to pay for it so my patients who need it can afford it.
- Too expensive
- More options in terms of edibles or something that is longer lasting.
- costs continue prohibitive for many cannabis candidates...
- decrease pricing, see insurance companies start covering medication.
- more dispensaries
- Pt suggested to get insurance to cover the program
- None besides the cost.

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- Expensive
- Patient stopped medication recently because of cost. If this could be reduced it would be beneficial for this patient.
- Turned to opiates since cannabis didn't help with the pain so much and the price on cannabis was expensive when he wasn't having much hours for work.
- patient lives in southwest corner of MN and lives 180 miles away from nearest dispensary so he needs a dispensary closer to him
- cost and distance to travel to the dispensaries
- Patients often need help with paying for this medication. If it was less expensive that would help.
- Cost has been an issue with patients involved with the program. They tend not to take as prescribed due to cost.
- none besides the fact that she is unable to financially pay for her oils.
- More centers
- I would be interested in knowing more about drug interactions as the patients I have that are dealing with chronic pain are often also dealing with mental health issues and psychoactive medications. What are you finding about interactions and/or positive/negative effects on mood of medical cannabis?
- Patient would like to see more a variety of products become available and more affordable.
- I think the patient survey's are more important than what I say.
- Can pharmacists encourage follow-up with their certifying clinician. I think this would be helpful and a collaborative approach regarding the use of medical cannabis.
- Expensive, pills too strong and don't work well, need lower doses on pills
- get insurance coverage
- Patient would like to see more dispensaries open up so he is not forced to drive over an hour to obtain medication.
- none. is very impressed with the program
- Patient needs f/up to re-evaluate. No longer a patient at our clinic.
- North West Metro dispensary and more conditions for use of cannabis because she has many family members or friends who would benefit but do not have the qualifying condition(s).
- The cost is very high and has affected going into to get refill. Possibly, growing cannabis to save the trip.
- [CANNABIS PATIENT CENTER] has very limited hours and she has gone days without cannabis and was in a lot of pain and has gone to the ER a few times.
- it works well
- Needs more of a referral source on finding provider who certifies, etc.
- No way to track if patient is indeed refilling/receiving the medical cannabis; you have to depend on patient report
- Patient states there should be a reduction in cost for those on fixed incomes.

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- Patient states that it should be easier for caregiver certification and that background check is not necessary.
- Patient suggests more delivery methods.
- Patient would like to see a variety of different cannabis strains used for the capsules and oils.
- Would like to see prices decrease for the cannabis and would like to see the program become more popular.
- Program is expensive.
- Expensive
- Besides the cost, offering more options on taking cannabis.
- More options or alternatives with form of taking cannabis.
- Expensive
- cost is still a significant barrier
- Patient's only concern is the cost.
- Has been pulled over from cops and taken to jail and court. He shows them his card, and they handcuff them, then they search his car. Got ticket and fine for medical marijuana. Had his card and it was dropped.  
Need to do education with the cops.
- more dispensaries
- besides the cost, everything has been very pleasant and easy.
- Besides the cost, more locations for others who have to travel further.
- make products more affordable
- Expensive
- Bring down the price of medical cannabis. I have had many people inquire about it but when they find out it is roughly \$500 + a month, they can not afford it.
- Was recertified and feels that cannabis does help. Some months he cannot afford it or does not take as much but uses when able to but is expensive.
- reduce cost  
insurance reimbursement
- It would be very helpful to know when these questionnaires are required so they can be done at the time I am seeing the patient. Is there a time frame in which the report needs to be completed?
- The rigid pain scale being used doesnt allow for the fact patients, like this one, can have a big range of "pain scores" day to day.  
I did enter this fact this patient will range from 0-5, but was blocked by the entry only allowed a whole number, ie no additional comments....especially that pain can vary wildly day to day, week to week based on activities, sleep quality, etc
- costs, as usual
- Would like to see the cost go down (2 responses)
- would prefer patients to have access to the regular plant products / leaf, etc due to control costs better

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- [CANNABIS PATIENT CENTER] has very limited hours and would like to see more hours of operation. More edibles to take rather than just vaping.
- cost is a problem for this patient
- cost is an issue for this patient
- more education for non-cannabis providers
- Would like to see this turn into a federal law.
- Patient would like to see costs go down, and availability of dispensary hours increase.
- Patient would like to see the costs go down so the medical cannabis products are more available to everyone.
- Patient would like to see price reduced and more dispensaries open.
- Patient would like to see more information on the product labels.
- Patient states that annually re-certification fees and seeing pharmacists every visit is an inconvenience.
- Patient states that the certification and registration process is confusing and tedious and should be made easier to complete.
- Patient would like to see topicals as a delivery method.
- make it more affordable.
- More convenient locations
- Decreasing the cost. That is the highest barrier to use.
- Would like to see the state expand the program and not have a "cookie cutting" program with dosage on medication. More case management per individual.
- More dispensaries in her area
- None, she is happy with the current program
- Patient would like to see them open up more dispensaries in the southwest region of Minnesota. The closest dispensary to them is about 100 miles away.
- Besides cost and wanting insurance, he has no other suggestions.
- Besides the cost, she feels that the program is great. Insurance coverage would be beneficial for those who are on disability.
- The decrease in expense has been good
- I would like an e-mail or some sort of notification when the patient starts the program after I certify them.
- Beside the cost, the dispensary has limited hours and is over an hour away, Rochester location.
- The Copay is making regular use for chronic pain for this patient unattainable unfortunately. He has severe spinal stenosis and may end up getting surgery.
- Continued concerns of patients ability to afford medical cannabis.
- Decrease cost (easy for me to say).
- just the cost
- She would like to see them expand the forms of medication such as patches, creams, lotions.

- Would suggest having the medical cannabis office have the patient call the practitioners office at the time of refill to complete the practitioners surveys in a more productive manner as patients are not easy to reach when they have no vested interest in calling back (i.e. they can get the med without going through our office for a script)  
The program needs to ensure that at the dispensary level if there are concerns they are redirected to the practitioner right away. Practitioners without “prescribing power” can not ensure patients will follow up but the dispensaries can. This is a difficult situation but can be easily resolved if communication between the Medical Cannabis Offices and the Practitioner are open.
- Cost is an issue
- Feels that refilling the 2 mL oils is not enough, she stated that usually only 3/4 of the vile is full but there's still room for more and the cost is so much for such a small amount and that adds up eventually.
- Health Insurance coverage would be beneficial for patients with Disability and more varieties on ways of taking cannabis.
- I will be retiring and the patient will need to find a new provider who is able to recertify.
- Can not use it as often as he would like due to financial reasons
- Make products more affordable.
- More dispensaries. Travels over an hour to Hibbing each time to get refills.
- Patient suggests that there be a stronger dosage available for severe pain patients.
- just the cost
- I am very pleased with how this worked.  
Cost is still a major issue and I would like to. See that  
Drop for patients
- None, would like to see cost come down.
- I would review the process for certification of medical cannabis. I would prefer when a patient was certified - my list of patients were not viewable on my computer monitor.
- Cost is quite a lot compared to using insurance but tries to manage as best as she can, sometimes it's not enough to help with her nerve pain.
- Besides the cost, he would like to see more options. He's very pleased with the staff members and their knowledge on cannabis.
- drives an hour to the dispensary, which is the closest, the Rochester/Bloomington.
- Easier access besides online, especially, if they do not have access to website.
- Does not tell people about cannabis use because of the stigma of cannabis and how others believe it's a drug and not for use, so she would like to see the MN DEPT OF HEALTH educate people and look at statics or studies on use and how it can improve quality of life.
- discontinued due to the cost and he relies heavily on his disability checks.
- [CANNABIS PATIENT CENTER] has very limited hours and this is an elderly patient that is dependent on family members taking him. Price is a bit expensive, but we did urge him to go back since the prices have dropped a bit since he last went in in October of 2016



- More varieties; topical.
- Besides cost, there doesn't seem to be anything he can think of. Possibly better ways to reach out to individuals on cannabis use. He knows that advertising is not the correct term but that seems to be the only term he can come up with.
- Financial help for cannabis. Also, mail out medication due to winter weather since he does travel a bit far. More access to the dispensary for locations.
- more options on taking cannabis besides the oils and capsules.
- besides the cost, she travels 3 hours to a dispensary.
- The cost of the medical cannabis is the main issue for most of the patients who would be a good candidate for this.
- This patient is very happy with medical cannabis and feels it has been very beneficial for her.
- Lowering the price and having more convenient dispensaries. [PATIENT] drives over 2 hours to the dispensary in St. Cloud.
- none besides being able to grow your own to save having to travel
- More variety on the cannabis choice, such as the actual plant itself
- more option on how to take cannabis - edibles
- feels that the quality of the product is not as well. More alternatives on how to take cannabis.
- None besides cost
- Patient was unable to continue using medical cannabis because of the cost, she would like to see prices be lowered so more patients have access to it.
- More feasible as far as the product pricing goes.
- Patient states that he thinks more qualifying conditions should be added to the program.
- Patient would like to see the costs go down so all patients have access.
- Patient would like to see more dispensaries opening and more qualifying conditions added to the program.
- Patient would like to see edibles added as a delivery method.
- Patient states that the medical cannabis products are too expensive for disabled low income patients.
- Patient would like to see costs reduced and more dispensaries open up.
- Patients have reported it is cost prohibitive.
- Patient would like to see medical cannabis covered by insurance or reduced prices.
- Patient would like to see less regulation on Minnesota's medical cannabis program.
- Patient would like to be updated on new changes and laws in the program.
- Patient states that he would like to see more products offered than the current ones.
- Patient would like to see less regulation in the medical cannabis program.
- Patient would like to see insurance cover medications for patients on disability or fixed incomes.
- Patient states that he would like to see flower as a delivery method.

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- Patient wants to know if the VA will ever get involved with helping cover costs for the medical cannabis since she is a disabled veteran.
- Patient states that the price is too high.
- Patient states that prices should be decreased if the program wants to succeed in the future.
- Patient would like to see the cannabis flower be dispensed as another option for a delivery method because the flower would be a lot less expensive than the cartridges.
- Patient states that she scheduled a consultation because she had medical questions about side effects she was having with the medical cannabis and the person who she met with could not answer her medical questions. She suggests a better online scheduling system for the program.
- Patient states that cost is a big issue in product, and would also like to see edibles and delivery services an option in the future.
- Patient states that a variety of cannabis products would be a lot helpful for her condition. She also wishes prices were lower so she could afford to consistently have her medicine on hand.
- Could not afford cannabis so she is no longer using. I highly suggested she try again or reach out to the previous dispensary to see if the prices had decrease since she last picked up cannabis.
- Nothing besides the cost.
- Offer more options in pill form
- Expanding qualifying conditions so more people have access to the cannabis program.
- N/A besides cost
- Would like to see prices lowered.
- Had used cannabis a few times and it relieved a lot of her stomach pain, along with fibromyalgia. She no longer needed to use cannabis on a daily basis since her pain how decreased and is manageable.
- Wanted to know about regulations if he was to travel outside of the state. Price is a bit expensive.
- Providing certifiers with some data about how much money patients are spending per month on average--- helps patients make some decisions before they have to pay fees.
- affordable in [CANNABIS PATIENT CENTER]
- mail out medication or open a location closer to [CITY]. Drives over 5 hours sometimes to get cannabis.
- Open more dispensaries so patient's do not have to travel as far to obtain product every month.
- Financial could not afford going into the dispensaries because of the recent holidays and cost of living being so expensive. Opiates insurance coverage but cannabis does not.
- Cheaper
- Decreasing pricing and simplify MDH website and allow for longer time periods to enter information in the website regarding surveys.