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February 9, 2022

The Honorable Luke Clippinger  
Chair, House Judiciary Committee  
House Office Building, Room 101  
Annapolis, Maryland 21401

**Re: HOUSE BILL 837—CANNABIS REFORM—FAVORABLE WITH AMENDMENT**

Dear Chairman Clippinger:

I am writing to thank you for introducing House Bill 837 (Cannabis Reform), which addresses a variety of important issues related to public health and social equity. While I support the bill and particularly the creation of the Cannabis Public Health Fund, I offer what I hope is received as a friendly amendment to the provisions creating the Fund. I have attached the proposed amendment below and explain the basis for the proposed amendment.

As you know, allowing access to cannabis, whether for medical or adult-use purposes, raises innumerable legal issues. Whatever decision this body makes with respect to legalization, myriad legal questions will arise, from the preemptive effect of federal law to the scope of local power within a state-level regulatory scheme. This body has grappled with these issues first with authorizing medical use and now as you consider legalization. Your workgroups and the experts you have pulled in for conversations have been vital to examining the public health, legal, social equity, law enforcement, government operations, and other issues that should be addressed with legalization. That need for support will only increase with legalization.

Unanswered questions on law and policy can threaten effective and efficient implementation of a legalization scheme. State and local legislative bodies, executive agencies, public health officials, law enforcement officials, courts, and other impacted parties need access to experienced, knowledgeable lawyers who understand cannabis legal issues as well as Maryland state and local government powers. I am confident that the University of Maryland Carey School of Law is the best source for this technical legal assistance. Indeed, through my colleague, Mathew Swinburne, we have been providing that support to the House Cannabis Referendum and Legalization Workgroup and its Senate counterpart (and related staff from the Department of Legislative Services), local health officials, law enforcement agencies, and community coalitions for more than three years. But funding limitations require that we be brief with our support and turn away some requests that exceed our current capacity. With

consistent funding, we could provide both responsive and proactive technical legal assistance more broadly and deeply.

Creating a legal resource center to provide this type of support would be based on a fine example already operating at Maryland Carey Law—the Legal Resource Center (LRC) for Public Health Policy. Though not specifically funded through statute, the LRC was created in 2001 as a result of the State receiving funds from the Tobacco Master Settlement Agreement and creating the Cigarette Restitution Fund. We have been continually funded through the Maryland Department of Health (MDH) for 21 years. We provide technical legal assistance to MDH and local health departments, the General Assembly and local legislatures, the Alcohol and Tobacco Commission (formerly the Comptroller’s Office), community coalitions, Maryland residents and businesses, medical professionals, and researchers. With free, accessible legal support, Maryland law and policy at the state and local level has been responsive to data on tobacco use and designed to stop emerging use trends that threaten public health. Collaboration between agencies and across levels of government is enhanced by the LRC’s involvement. We are proud of our accomplishments and want to offer the same support on cannabis law and policy.

A Cannabis Legal Resource Center would benefit from my more than 30 years of practicing law in Maryland, with the overwhelming majority of those years in government practice, supporting state and local legislatures, public health agencies, and communities. I have earned the trust of local health officers and legislators as an attorney who both understands public health law and state and local government law. Add to my decades of experience, the deep and broad knowledge of cannabis law and policy that Mathew Swinburne has and the Cannabis Legal Resource Center at Maryland Carey would quickly become a trusted and valued part of the team of the myriad people working to realize the benefits and protect against the potential harms of cannabis legalization. Indeed, we have solid relationships with leaders at the Maryland Medical Cannabis Commission and the Alcohol and Tobacco Commission, both of which will likely be involved in cannabis regulation after legalization. There will be great need for technical legal assistance in the cannabis space and have proven experience to deliver this service.

The attached amendment addresses this significant need by creating a line item in the Cannabis Public Health Fund for the provision of technical legal assistance, with specific designation of the University of Maryland Carey School of Law as the source to provide that support. Getting a Cannabis Legal Resource Center up and running as legalization occurs will be critical to effective implementation, ongoing compliance, and policy adjustment. We look forward to the opportunity to provide that support.



Kathleen Hoke  
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University of Maryland Carey School of Law

**PROPOSED AMENDMENT TO HOUSE BILL 837 (2022)**

PAGE 29, LINE 7, AFTER "INDIVIDUALS;" , STRIKE "AND".

PAGE 29, AFTER LINE 9, ADD:

(6) FUNDING THE UNIVERSITY OF MARYLAND FRANCIS KING CAREY SCHOOL OF LAW TO PROVIDE TECHNICAL LEGAL ASSISTANCE ON CANNABIS LAW AND POLICY TO:

- (A) THE GENERAL ASSEMBLY AND DEPARTMENT OF LEGISLATIVE SERVICES;
- (B) STATE AGENCIES AND ENTITIES, INCLUDING THE ADVISORY COUNCIL;
- (C) LOCAL GOVERNMENT AGENCIES, LEGISLATURES, BOARDS OF HEALTH, BOARDS OF EDUCATION, AND OTHER ENTITIES;
- (D) STATE AND LOCAL LAW ENFORCEMENT AGENCIES;
- (E) PUBLIC AND PRIVATE INSTITUTIONS OF HIGHER EDUCATION;
- (F) TRADITIONAL MINORITY-SERVING INSTITUTIONS IN THE STATE AND SURROUNDING JURISDICTIONS, INCLUDING HISTORICALLY BLACK COLLEGES AND UNIVERSITIES;
- (G) TRADE ASSOCIATIONS REPRESENTING MINORITY AND WOMEN-OWNED BUSINESSES;
- (H) COMMUNITY COALITIONS FORMED TO ADDRESS PUBLIC HEALTH AND SUBSTANCE USE IN THEIR COMMUNITIES; AND
- (I) NON-GOVERNMENTAL ORGANIZATIONS WORKING IN PUBLIC HEALTH LAW AND POLICY.

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