

MARYLAND CANNABIS PUBLIC HEALTH ADVISORY COUNCIL

February 24, 2026

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The Honorable Pamela Beidle
Chair, Finance Committee
3 East Miller Senate Office Building
Annapolis, MD 21401-1991

**RE: Senate Bill 594 –
Cannabis - Advertising - Alterations – Letter of Opposition**

Dear Chair Beidle and Committee Members:

The Maryland Cannabis Public Health Advisory Council (CPHAC) respectfully submits this letter in opposition to Senate Bill 594 Cannabis Advertising Alterations.

SB 594 weakens several key public health protections in Maryland law that prohibit advertising to minors (those under 21 years of age). These changes substantially narrow existing safeguards and increase the risk that cannabis marketing will reach and influence Maryland’s youth. There is no marketing justification for relaxing these public health safeguards, as Maryland’s legal cannabis market is flourishing under current law. Total cannabis sales topped \$1 billion in both FY 2024 and FY 2025¹. Adult-use sales increased almost five-fold from July to December 2025, without any loosening of advertising restrictions.

SB594 removes the ban in current law on advertising that “indirectly target[s]” or “is attractive to” minors. Public health evidence demonstrates that marketing does not need to be explicitly targeted or attractive to adolescents and youth to influence their behavior. This is why the Master Settlement Agreement between the tobacco industry and state attorneys general (including Maryland) prohibits both “direct and indirect” targeting of underage individuals by advertising². Research consistently shows that exposure to cannabis advertising is associated with^{3,4}:

- Increased cannabis use among adolescents
- Greater intentions to use cannabis
- More favorable attitudes toward cannabis
- Higher risk of cannabis use disorder

¹ Maryland Cannabis Administration. (n.d.). MCA Medical and Adult-Use Cannabis Data Dashboard. Maryland Cannabis Administration. Retrieved February 17, 2026, from <https://cannabis.maryland.gov/pages/data-dashboard.aspx>

² National Association of Attorneys General. (2019). Master Settlement Agreement and exhibits. <https://www.naag.org/wp-content/uploads/2020/09/2019-01-MSA-and-Exhibits-Final.pdf>

³ Cannabis Marketing and Problematic Cannabis Use Among Adolescents, Pamela J. Trangenstein, et. al., Journal of Studies on Alcohol and Drugs, 82(2), 288-296 (2021).

⁴ Planting the Seed for Marijuana Use: Changes in Exposure to Medical Marijuana Advertising and Subsequent Adolescent Marijuana Use, Cognitions, and Consequences Over Seven Years, Elizabeth J. D’Amico, et al., Drug and Alcohol Dependence, Volume 188, 385-391 (2018).

SB 594 narrows the ban on making a “therapeutic or medical claim” for a cannabis product by prohibiting only “a claim that explicitly states a product can diagnose, treat, mitigate, cure, or prevent a disease or condition.” This weakens the current ban in two ways: 1) It allows implied or suggestive health claims, which can also influence consumer perception. 2) It narrows the definition of a “therapeutic or medical claim” to mirror the US Food and Drug Administration (FDA) definition of a “drug.” The FTC regulates all claims in advertising including implicit health claims⁵. SB 594 would weaken MCA’s regulatory authority over cannabis health claims. Majority of other states with adult use cannabis markets^{6,7} prohibit marketing which indirectly targets minors. SB 594 would make Maryland a pioneer in weakening cannabis public health standards.

SB 594 allows additional exterior signage on cannabis dispensaries beyond what is permitted by current law. While additional signage can only contain administrative and safety information, any signage increases the environmental prominence of the dispensary. Exposure to dispensaries is associated with increased interest in and actual use of cannabis by adolescents⁸. The information allowed on this additional exterior signage confers little or no consumer or public health benefit. It is unlikely that a passing motorist or pedestrian will record this information for use.

SB 594 changes the method for establishing that the expected advertising audience age composition is at least 85% adult. Current law allows the Maryland Cannabis Administration (MCA) to make this evaluation. SB 594 requires the MCA to accept the most recent audience composition data from advertising entities. This gives less weight to independent measures of audience composition, e.g., Nielsen ratings for broadcast audiences.

SB 594 creates a potentially large loophole in the current advertising ban by excluding from the definition of advertising mention of a cannabis dispensary’s branding and business information in the context of news articles, interviews, and editorial content. Nothing would preclude a cannabis representative from promoting a dispensary on a news media, social media or podcast interview.

In conclusion, The Maryland Cannabis Public Health Advisory Council respectfully urges the Committee to issue an unfavorable report on SB 594. We urge the General Assembly to maintain strong, evidence-based protections that prioritize the health and wellbeing of Maryland’s children and adolescents.

Respectfully submitted,



Deondra Asike, M.D.

Chair, Maryland Cannabis Public Health Advisory Council

⁵ Federal Trade Commission. (2022). Health products compliance guidance (FTC Publication). U.S. Federal Trade Commission. https://www.ftc.gov/system/files/ftc_gov/pdf/Health-Products-Compliance-Guidance.pdf

⁶ Network for Public Health Law. (2022). State regulation of adult-use cannabis advertising (Fact sheet). <https://www.networkforphl.org/wp-content/uploads/2022/11/State-Regulation-of-Adult-Use-Cannabis-Advertising.pdf>

⁷ States that only prohibit “attractive” or “appealing”: Ala. Code § 20-24-61; Alaska Admin. Code tit. 3, § 306.770; Cal. Code Regs. tit. 4, § 15040; Conn. Gen. Stat. Ann. § 21a-421bb; Code Del. Regs. 5001-10.0; Fla. Stat. Ann. § 381.986(9)(b)(2)(b); 410 Ill. Comp. Stat. Ann. 705/55-20; Mass. Ann. Laws ch. 94G, § 4; Mich. Admin. Code R. 420.507; 15 Miss. Code R. 22-9.1.2; Mo. Code Regs. Ann. tit. 19, § 100-1.010; Mont. Code Ann. § 16-12-211; Nev. Admin. Code § 453D.470; N.J. Admin. Code § 17:30-17.2; N.M. Admin. Code § 16.8.3.8; NY CLS Cannabis § 86; Ohio Admin. Code 1301.18-4-22; Okla. Stat. tit. 63, § 427.21; 560 R.I. Code R. § 010-10-2.8; Utah Admin. Code R66-2-21; 25-000-002 Code Vi. R. § 1; Va. Code Ann. § 4.1-140; W. Va. Code R. § 64-109-23.2.1.b. States that use language reflecting an indirect targeting standard: Ark. Code Ann. § 20-56-305; Fla. Stat. Ann. § 381.986(9)(b)(2)(b); 410 Ill. Comp. Stat. Ann. 705/55-20; 915 Ky. Admin. Regs. 1:090; Mass. Ann. Laws ch. 94G, § 4; Mich. Admin. Code R. 420.403; 15 Miss. Code R. 22-9.1.2; Mont. Code Ann. § 16-12-211; Nev. Admin. Code § 453D.470; N.J. Admin. Code § 17:30-17.2; N.M. Admin. Code § 16.8.3.8; NY CLS Cannabis § 86; OAR 845-025-8040; 560 R.I. Code R. § 010-10-2.8; Utah Admin. Code R66-2-21; 25-000-002 Code Vi. R. § 1; Va. Code Ann. § 4.1-1401; Wash. Rev. Code Ann. § 69.50.369; W. Va. Code R. § 64-109-23.2.1.b. States that incorporate both: 410 Ill. Comp. Stat. Ann. 705/55-20; Mass. Ann. Laws ch. 94G, § 4; Mich. Admin. Code R. 420.403; 15 Miss. Code R. 22-9.1.2; Mont. Code Ann. § 16-12-211; Nev. Admin. Code § 453D.470; N.J. Admin. Code § 17:30-17.2; N.M. Admin. Code § 16.8.3.8; NY CLS Cannabis § 86; 560 R.I. Code R. § 010-10-2.8; Utah Admin. Code R66-2-17; 25-000-002 Code Vi. R. § 1; Va. Code Ann. § 4.1-1401; Wash. Rev. Code Ann. § 69.50.369

⁸ Moran, M. B., Tharmarajah, S., Czaplinski, L., Thurl, J., Spindle, T. R., Vandrey, R., Pearson, J. L., & Zamarripa, C. A. (2025). A narrative review of research on cannabis advertising in the United States. *Current Addiction Reports*, 12(1), Article 92. <https://doi.org/10.1007/s40429-025-00703-1>