

**HOUSE OF REPRESENTATIVES  
COMPILATION OF PUBLIC COMMENTS**

Submitted to the Committee on Public Health  
For HB 46

Compiled on: Tuesday, April 15, 2025 12:00 AM

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Hearing Date: April 14, 2025 8:00 AM

Louis Lux, MD

Self

Lubbock, TX

Members of the House Public Health Committee,

Thank you for the opportunity to testify in support of HB 46, as well as the Texas Compassionate Use Program in general.

My name is Louis Lux, I am a registered medical cannabis prescriber in Texas, and I am a board-certified in internal medicine and palliative medicine, and I am fellow of the American Academy of Palliative Medicine (FAAHPM). I have worked in academic and private practices, currently I work for Texas Oncology as a palliative medicine and supportive oncology physician, which serves cancer patients in every corner of the state. The mission in palliative medicine and supportive oncology is to relieve suffering for cancer patients.

I have scores of patients whose lives have been significantly improved with medical cannabis as a treatment for severe symptoms in their battle against cancer. I have over 850 patients registered in the Compassionate Use Program, in which I have participated in for several years.

Reasonable access to safe and clean medical cannabinoids is crucial for medical care of these patients with great suffering and life-limiting illness. As you may be aware, concurrent use of cannabinoids may allow patients to decrease their use of opioid medications, and other controlled substances such as sedatives, or in some cases eliminate these medicines entirely. Medical cannabinoids also address other symptoms such as sleep, nausea, anxiety, and appetite stimulation as well without as many side effect as “traditional” medications.

Having an inhalation option such as a vapor device would be extremely helpful to address severe acute pain or nausea episodes — as oral medication can take 30-90 minutes to become effective. This delay can and does lead to patient's seeking care in an emergency room or urgent care facility. Going to an ER or Urgent Care usually results in the patients receiving an intravenous pain medication that lasts only an hour or two, at the cost of several thousand dollars and unnecessary exposure to other infected patients.

Additionally, the inhalation option would deter the patient using unregulated cannabis, which could contain contaminants, adulterants, or bacteria. All of these possibilities represent a threat to cancer patients.

Next, improving remote access through the improved efficient distribution systems of medical cannabis in a controlled and monitored manner would be a major help in our huge distribution process could decrease the cost of medication, allow for more rapid delivery of the medication to the patient. Medical cannabis is not covered by insurance, but an out of pocket expense for patients.

I also strongly support the listing of cannabinoid medication components such as THC and CBN in milligrams versus percentages as percentages are completely inaccurate, confusing, and imprecise. It requires additional calculations to configure a proper

dosing regimen both on the part of the

Sophia Mirto

Self

Austin, TX

Please support access to painkillers for Texans.

Julie Campbell

self - nurse

Missouri City, TX

I submit this testimony in support of House Bill 46. This bill advances a sustainable medical cannabis program in Texas, prioritizing patient well-being and product quality.

Compassionate Use Program products are medical, not recreational. CBD and THC are FDA-recognized drug ingredients, approved for supervised patient use. Federal law prohibits interstate commerce of foods containing these compounds, but state-regulated programs like ours, grounded in “right to try” principles, provide access to cannabis-based products under state law, free from interstate commerce.

To ensure a medical focus, I urge the committee to review FDA materials regarding cannabinoid use and adopt FDA-aligned statutes, including:

- Allow physicians to prescribe cannabis at their discretion, as with other drugs, based on professional judgment, not state mandates. Doctors, not the state, should decide what is appropriate for their patients.
- Prevent the sale of artificial or synthetic cannabinoids, restricting products to naturally created cannabis compounds.
- Prohibit program enrollment by pregnant or nursing patients, per FDA guidance, to protect the unborn and newborns. The FDA has a website exclusively dedicated to CBD & THC use while pregnant or nursing. Texans must protect the unborn and newborn.
- Require pharmacists on staff of licensed facilities to aid inventory control, patient education, and product dispensation to reinforce that Texas is a medical market – not recreational.
- Permit inhalation and absorption methods for rapid and extended relief, crucial in emergencies.

Access remains a critical issue, with only three licensed locations statewide. The 2015 bill intended broader access, but strict limits prevent operators from opening multiple retail sites. I encourage the legislature to include the following language:

- As recommended by the TXDPS report, require that the state license at least 10 vertical operators.
- Require operators to maintain one retail location per Public Health Region for statewide access, while continuing to allow production facilities to be anywhere.
- Operators should be licensed using a competitive evaluation, clearly spelled out by the legislature, focused on medical applicants located and based in the State of Texas.

The legislature must draft precise language. Despite industry consensus and an attorney general opinion that neither statute nor regulations prohibit transportation between multiple locations, current operators are still prohibited from operating multiple retail locations because such an allowance is not explicitly permitted. I would urge the legislature to be as clear as possible with language pertaining to products, patients and licensing to ensure a functioning program with clearly established legislative expectations and goals.

Daniel Word  
self - engineer  
HOUSTON, TX

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The legislature must draft precise language. Despite industry consensus and an attorney general opinion that neither statute nor regulations prohibit transportation between multiple locations, current operators are still prohibited from operating multiple retail locations because such an allowance is not explicitly permitted. I would urge the legislature to be as clear as possible with language pertaining to products, patients and licensing to ensure a functioning program with clearly established legislative expectations and goals.

Elizabeth Gwisdalla  
Self-homemaker  
Cresson, TX

THC is a great medicine for lots of people. It’s a natural plant, and in most of the world it is legal now. I personally know people who have let go of their opioid addiction and switched to weed.

I don’t understand how the state of Texas can give warning after warning on people who drink and drive, people caught with fentanyl, coke ect. People can party and drink and take drugs and go home at the end of the night, cause a few fights, hurt people and nothing be done. But god forbid, someone rolls a joint in their own home, smokes it to help eat a little food and go to bed, it’s the end of the world.

Shannon Crow  
self - entrepreneur  
Houston, TX

I'm a 5th-generation Texan with degrees in global studies and economics from St. Edward University. I've worked in the cannabis industry for a decade, both in licensing and operations, in recreational markets like California and Colorado and medical ones like Alabama and Missouri. I also managed a plant at Bowery Farming, then the world's largest indoor farming company. I support House Bill 46 as a potential patient of Texas' Compassionate Use Program (TCUP). This bill advances a sustainable medical cannabis program focused on patient care and product quality.

Products manufactured and dispensed under TCUP are medical products and should be treated as such. CBD and THC are recognized by the FDA as active drug ingredients. Both compounds have been evaluated through rigorous studies and approved by the FDA for patient use under the supervision of medical professionals. This is why the interstate commerce of any food containing CBD or THC is prohibited under the Federal Food, Drug & Cosmetic Act. Programs such as TCUP were established in the spirit of right to try to give qualifying patients the "right to try" cannabis-based products outside of the limited FDA approved drugs. Such programs are exclusively regulated under state law and have no interstate commerce.

In furtherance of its treatment as a drug, I would urge the committee to review FDA material regarding cannabinoid use and adopt statutes that supports such use. Language should include the following:

- Allow physicians to prescribe medical cannabis to their patients based on professional judgement rather than state restrictions. Like with all other drugs, it is doctors, not the state of Texas, who should decide what is appropriate for Texas patients.
- Prohibit artificial or synthetic cannabinoids - products sold under the program should focus on cannabinoids naturally created in the cannabis plant
- Bar pregnant and nursing patients from the program. The FDA has a website exclusively on CBD & THC use while pregnant or nursing. This use should be severely limited or prohibited. We must protect the unborn and newborn.
- Require pharmacists at licensed facilities to manage inventory, educate patients, and dispense products, ensuring a medical—not recreational—market.
- Permit inhalation and absorption methods for both rapid and sustained relief. This is critical for emergency situations.

Finally, the legislation must use precise language. Product access is one of the primary program issues, with only three locations permitted in the entire state. Despite industry consensus and an attorney general opinion that neither statute nor regulations prohibit transportation between multiple locations, current operators are still prohibited from operating multiple retail locations because this is not explicitly permitted. Clear language pertaining to products, patients and licensing is necessary to ensure a functioning program with clearly established legislative expectations and goals.

Ofelia PUENTE  
Self/retired  
San Antonio, TX

Please sir pass this bill it is desperately needed and this substance needs to be not stigmatized.

Danielle Bryant, Dr.  
Self  
Austin, TX

I'm writing in strong support of HB46. This bill takes a thoughtful, medically grounded approach to expanding cannabis access for patients in Texas. By clearly defining allowable THC levels and approving alternative forms like patches, lotions, and inhalers, this legislation provides relief to those who need it — especially individuals dealing with chronic pain, epilepsy, or cancer. Texans deserve access to modern, effective treatments. This bill respects science, centers patient care, and brings Texas closer to the kind of compassionate healthcare policy seen in other states. I urge you to support HB46 and help move our state forward.

Charles Atwill  
Self  
Del valle, TX

I oppose

Lisa Pittman  
self, attorney  
Austin, TX

I'm Lisa Pittman, an attorney advocating for the Compassionate Use Program (CUP) since 2015. I am neutral on HB46, supporting it except for two things, the limitation on licenses and failure to add conditions. If these are not addressed in HB 46, we will continue to have to return Session after Session to beg for more licenses and conditions. Let's pass a functioning statute now that preserves and expands DPS' discretion to adapt the parameters of the CUP as experience will dictate. Currently, Texas allows unlimited licenses, with DPS managing the number of licenses based on its determination of the need to ensure statewide patient access. Now, there are three licenses centrally located. DPS was recently provided recommendations by a consultant to increase the number and location of licenses. DPS also has a work group to advise it, therefore, DPS has resources that help it to manage the CUP. DPS also has 138 applications from businesses eager to get a license. It's better to allow DPS to decide the number of licenses based on these resources under its mandate to ensure statewide patient access. An immutable limit of 11 licenses should not be added to the statute. That strips DPS's current discretion and contradicts DPS' mandate to ensure access. Now, DPS may award more licenses in certain areas due to demonstrated patient need that may arise. Notably, every state that has statutorily limited the number of licenses has had this artificial limitation challenged and set aside by lawsuits. We should just leave the statutory language as is, that at least 3 licenses must be awarded. Or change the number of at least 3 to "at least 11," one per Texas health district, preserving DPS flexibility.

The other fault with HB 46 is the failure to include any new conditions or any mechanism for DPS or physicians to add conditions between Sessions without the need for constant legislative interference. Because the CUP covers few conditions, many turn to unregulated, untested, cheaper, and more available hemp products. I suggest either adding conditions or establishing a procedure for doctors to ask DPS to acknowledge new conditions, rather than enshrining only certain ones in the CUP. We should let physicians and the DPS decide. No new conditions have been added since 2021. We are looking at 2027 to add a single new condition - that is 6 years of patients waiting for their condition to be added. 8 if nothing happens in 2027, as in 2017 & 2023. Half the country has legalized marijuana, and with so few conditions, patients have turned to hemp at the gas station, online, or illegal market. While I don't think that's what was intended by our laws, we can't ignore the reality. Patients prefer regulated accessible products from the CUP, and it's time our statute is written to breathe over time with flexibility over DPS' management of the size of the CUP, both in terms of licenses and conditions. More of both will also lead to access to more economical legal products.

CLAUDIA GHIO

Self  
West Lake Hills, TX

I am in FAVOR of this bill.

Trisha Yardley  
self-nurse  
Austin, TX

For--there are studied benefits of low THC items. Studies showing people with anxiety/ADHD, difficulty sleeping, hyperemesis, etc. having benefits from using such items. low THC does not necessarily impair ones ability to make sound decisions.

Holly McCord

Self

Austin, TX

I want to see TCUP improved and expanded, more qualifying conditions added, especially chronic pain. A DR (not politicians) should be able to determine dosing and who is an appropriate candidate for the program. The method of consumption should 100% include inhalants and transdermal patches. TCUP needs to be of value, be affordable and easily accessible to ALL TEXANS. I lost my best friend to cancer and I guaranty, if you or anyone you know gets cancer, you'll want easy access to cannabis. Including high doses and various methods of consumption.

In the spirit of free enterprise and innovation, remove the statutory cap on the number of licenses. Let the Department of Public Safety determine the appropriate number of licenses based on patient need, population, and infrastructure.

Additionally, licensing fees should be reconsidered. The current \$488,000 initial fee and \$315,000 renewal fee every two years create a barrier to entry and limit competition—especially for small businesses. Please let Texas businesses create and maintain the TCUP program and not big MSO's or Big Pharma.

Thank you for your time and consideration!

Jesse Garcia, Mr.

Self/family members

Houston, TX

This is a very helpful, God given medicine that grows from the earth. Please listen to 70% of the state. And I'm sure those numbers are much higher.

Jacob Cortez

Self

Houston, TX

This will not only hurt the local economy, but those who utilize hemp for medicinal purposes.

Jason Macarski, Mr

Self Navy veteran

Corpus Christi, TX

My vote is no on. hb46.. nueces county resident

Jason Howland, TSgt, USAF, retired

Self

Quitman, TX

Chairman and Members of the Committee,

My name is Jason Howland. I'm a 20 year retired Airman and a proud Texan. I'm writing today in strong support of House Bill 46, which seeks to improve the Texas Compassionate Use Program.

Like many veterans, I struggled with chronic pain, anxiety, and other service-related conditions after my time in uniform. The VA prescribed me over 20 different medications. While those prescriptions were written with good intentions, the side effects often left me feeling numb, disconnected, and far from myself.

Cannabis changed that. Under the guidance of a physician and as part of a holistic approach including diet and exercise, medical cannabis helped me manage my pain, reduce inflammation, and support my mental health. Today, cannabis is one of the few medications I take.

HB 46 would bring long-overdue improvements to the program by measuring THC in milligrams rather than by percentage, allowing safer and more effective delivery methods like patches and lotions, and expanding access to underserved parts of Texas. These common-sense updates are essential to ensuring that patients—especially veterans like me—can safely and legally access the medicine they need.

This is not about getting high—it's about getting better. HB 46 helps us do that. I respectfully urge you to support this bill and give Texans a more compassionate, accessible, and medically sound path forward.

Thank you for your time and for your commitment to those of us who have served.

Sincerely,

Jason Howland, MHR

USAF, retired

Quitman, Texas

Sharon Mineo

Self, Admin

Austin, TX

I support this bill.

Alma Garcia

self

San Benito, TX

I oppose this bill as the TCUP program does not provide enough variety in products and establishments where texans can purchase this low dose THC. The prices are also to high for the majority of texans who would most benefit from this program.

Roberto Flores

Self/retired

Laredo, TX

I'm a retired law enforcement officer. I was also medically retired from the US Army. I suffer from Gulf War Illness. The medical system had me on opiates and benzodiazepines for over ten years. Tragicaly, this us not an uncommon scenario for many veterans. This caused more problems for me physically and mentally. I am grateful that I can legally access thc through the synthetic thc market. This offers relief from chronic pain anf PTSD. With the possibility of losing access to synthetic thc in Texas, I fully support the compassionate use program. With 22 veterans dying daily, this is a badly needed medical alternative, that offers hope for Texans. I hope and pray you will support this too. Thank you and may God bless the great State of Texas!

Brandon Saldivar

Self

Hockley, TX

Please understand that the use of low MG of thc has helped many people including myself. Its helps with pain relief, anxiety, depression. Many older folks benefit from this low dose thc a lot better than over the counter and prescribed meds. I myself seen my grandmother take all these meds for medical reasons and switched over to thc a very low dose and has helped her out tremendously. For her depression she deals with. For me I use a ratio 1:1 thc and cbd for my anxiety and back pain due to a car accident I have had in the past. Please consider what y'all are doing and trying to take away. Thank you, I know you all will do what's best, thank you again.

Jenny Howland, Dr.

Self; Licensed Clinical Psychologist and Director of Health and Wellness for a national non-profit veteran service organization  
Quitman, TX

As a Texan deeply concerned about our mental health and addiction crisis, I'm urging you to support House Bill 46. Having worked in the mental health space and specifically the veteran space for over 15 years, I have seen firsthand how medical use of low-THC cannabis can help our nation's heroes and others suffering from trauma and mental health issues. I have seen more veterans than not with over 20 prescription medications to address a host of concerns, including chronic pain, depression, anxiety, posttraumatic stress, and the list goes on. I have seen the Texas Compassionate-Use Program help these veterans reduce or completely eliminate pharmaceuticals and begin thriving again. Please vote yes on HB 46.

Katie Spence

myself, homemaker

Austin, TX

Please pass HB 46 out of committee. This is a good bill that provides common sense regulation of THC for medical use. This has the potential to help lots of Texans who suffer with PTSD, anxiety and other health challenges. The Texas Compassionate-Use Program is a real source of aid for many of our Texas veterans.

Marcella Tincher

SELF

Sugar Land, TX

Any improvements to the TCUP is greatly appreciated. There is always room for improvement on a program designed for the patients in the great state of Texas. I would encourage everyone who is an elected official to educate themselves further with regard to the many therapeutic benefits of cannabis in order to improve TCUP going forward.

Heather Fazio  
Texas Cannabis Policy Center  
Austin, TX

Written Testimony in Support of House Bill 46: Improving the Texas Compassionate Use Program  
Chairman VanDeaver and Members of the Committee,

Thank you for the opportunity to submit testimony in strong support of House Bill 46 by Chairman Ken King. This important legislation takes a much-needed step forward to strengthen the Texas Compassionate Use Program (TCUP), improving access, availability, and treatment options for patients across the state.

Today, only three licensed dispensaries serve all of Texas. While over 107,000 patients have enrolled since the program's inception, just 21,000 remain active—only 20%—highlighting major gaps in patient access and retention.

Key Improvements in HB 46:

**Dose-Based Limits:** THC would be measured in milligrams rather than by weight percentage—more consistent with standard medical dosing. Patients could receive a 90-day supply, with up to 20mg THC per dose and 1.2g THC per package.

**Expanded Product Options:** Authorizes the use of patches, lotions, suppositories, and approved inhalers, nebulizers, and vaping devices—offering safer, more appropriate options for many patients.

**Regional Access:** DPS would be required to issue 11 licenses, distributed across Texas' 11 public health regions. Satellite dispensing locations would also be permitted with DPS approval.

These updates directly respond to the 2024 Compassionate Use Program Analysis from DPS, which concluded that the current program “does not meet either the access or availability standard statewide.”

Recommendations for Further Improvement:

**Patient Access:** We strongly support HB 46 and urge the committee to allow more qualifying conditions so more patients can participate in TCUP. Ideally, doctors should decide who can benefit. At a minimum, patients experiencing severe pain should be allowed to use cannabis as a safer alternative to opioids. DSHS should also be empowered to approve additional conditions based on emerging science and patient needs.

**Licensing Reform:** In the spirit of free enterprise, the cap on the number of licenses should be removed. DPS can ensure appropriate distribution based on public need and infrastructure. Additionally, licensing fees—currently \$488,000 initially and \$315,000 every two years—should be reevaluated. These high costs limit competition and exclude small businesses from entering the market.

HB 46 is a thoughtful, practical bill that improves patient access and strengthens Texas' medical cannabis infrastructure. We respectfully urge your support, along with consideration of the above recommendations to make TCUP more equitable, sustainable, and effective for Texans in need.

Thank you for your time and service.

Sincerely,

Heather Fazio  
Director, Texas Cannabis Policy Center  
512-825-9142 | hfazio@txmjpolicy.org  
www.TexasCannabisPolicy.org

Marian Little, Ms.

Self, Business Owner

Austin, TX

I am writing in strong support of the regulated sale and distribution of cannabis in Austin, Texas. Legal cannabis offers a critical opportunity for our state to generate tax revenue, reduce the criminalization of non-violent offenses, and create equitable business opportunities—especially for communities historically harmed by the war on drugs.

Proper regulation means we can ensure product safety, protect minors, and implement smart, community-based public health initiatives. I urge our lawmakers to stand with the people and move forward with cannabis policy reform rooted in equity, sustainability, and economic growth.

Kelli Goodman, Miss. Goodman

Self

Katy, TX

I have CRPS.

I went to pain clinic for 3 years, and they had me on many narcotics which had horrible side effects.

Then I qualified for medical cannabis. It was a game changer. I use medical cannabis and am thankful for it. It helps manage my pain without harsh side effects.

I'm 59 young

Please keep our medical cannabis

Melanie Adams

Self

Fort Worth, TX

As a disabled 55yo who suffers and is on permanent chronic pain care management with JPS Healthcare system, I was at one time taking 800mg Gabapentin 3x/day (2400mg). It further limited my daily functionality. Zombie mode. My kidneys, cholesterol and depression were impacted. I knew I wasn't ready to succumb to the numb. And I wasn't willing to go on opioids (allergic reaction, numbed mind, concern of addiction and the toll on my body/organs).

So I saw a TCUP Dr about getting natural support that was kinder to my mind and body. I was SO RELIEVED to find a perfect 30mg/dose that works beautifully for me. I have reduced my Gabapentin to 1-2x/day (800-1600mg) by using the currently available 30mg/dose gummy. Utilizing TCUP has provided more mental clarity and ability to learn how to create user generated content (product reviews) from home. I now have hope of being able to earn a few dollars a month to pay for meds.

I know patients like me and veterans often require 100mg/doses of cannabis. Every body metabolizes differently and requires different doses/Rx. Cancer patients may require higher doses.

For this reason, limiting THC mg/dose would be a grave mistake. It would push people back into opioids/addictions/untimely fatalities and mind-numbing loss of function.

I don't want to take 40mg TCUP doses, which is what restricting to 20mg/dose would push me to do bc I NEED the 30mg.

Additionally, TCUP is already so expensive that limiting mg/dose would double the expense for me, exclude many individuals and be cost prohibitive. This would offer little compassionate relief for Texas' most vulnerable patients.

I strongly urge and implore you to allow Physicians to guide patient mg/dose and not to politicize limit or restrict mg/dose for medical patients who clearly qualify for being treated with compassion. (And for their affordable access to receiving a necessary natural supplement through integrative medical treatment in TCUP).

People like me are incurable. Pain has stolen much from our lives. Prescriptions have been HARD on our bodies. And a seed bearing herb provides natural relief (for pain, sleep, appetite, hope, presence, energy, motivation, functionality, and most importantly, dignity).

Please don't support perpetuating the opioid crisis and its fatalities or the need for thousands of mg of heavy meds that contribute to organ damage/failure by limiting mg/dose.

Cannabis relieves suffering. For more than 5,000yrs humans have used it as a healing plant, w/no concern of doses. Scholarly research has proven its efficacy and safety. Cannabis saves/extends lives and gives the weak dignity.

I plead for Patient/Physician led care re ongoing Rx mg/dose as the most logical and compassionate. Patients may require increased doses over long periods of time.

I am so grateful for Texas' TCUP & my 30mg gummy. I've suffered chronic illness for 25yrs. Today, I strongly voice my opposition to limit mg/dose of safe + effective plant medicine.

Anthony Navarro

Self

San Antonio, TX

Hi there I'm glad Texas Tcup is getting a up grade because to see the hemp industry take over and show us Texans what the Tcup program can be i love the Tcup program it just needs more options of products to choose from thanks again

Erin Mason  
Self/retired military  
Quitman, TX

Good Morning and thank you for giving this bill a chance, I am a disabled military veteran that uses cannabis for pain relief. I support this bill and hope that TCUP program can be expanded to support veterans like myself. In other medical states I would use dermal patches for my back pain that I injured on the flight deck and suppositories for monthly cramping. Cannabis is a medicine and I am grateful Texas is standing in line to support it for our communities. The Veterans Affairs prescribes me medication that doesn't allow me to be a present mother while cannabis helps me to be a better version of myself when dealing with a painful medical history. I believe adding more licenses will help with the high cost of our current TCUP program, with having more competitors in the rung will allow the prices to be lowered and competitive for patients seeking relief options. Thank you for your time and your fight for liberty!

Jessica Lytle  
Self  
Houston, TX

I'm in full support of HB 46, as a caregiver and wife of an epileptic. The Tcup program has helped my husband significantly and it's just one more tool in the box for us to help fight this disorder. It is crucial for us to continue to develop more ways we can deliver this medicine in emergency situations on top of daily use. I hope we can continue to have these conversations about the impact THC has medically. Our life would be dreamily different if we were able to explore more options where pharmaceuticals have let us down.

Our next option would be to leave Texas all together. As his wife I have at least explore the other options.

Sarah Moseley  
Self, patient coordinator  
Fort Worth, TX

My name is Sarah Moseley, I live in Fort Worth and I am the patient coordinator for one of the biggest Texas medical cannabis providers in the state. My job is to help people find out if they're eligible for the program, get them set up with their appointments and answer their questions about the program. I spend my days on the phone with people who are desperately trying to find help for their condition.

I agree with quite a few things in this bill, such as opening it up to 11 more dispensaries and adding satellite locations, opening up the products people can choose from, and the addition of inhalants. However, as someone who daily has to tell people that their conditions don't qualify them while they're crying in pain telling me they don't know what else to do, I think we need to seriously consider opening up the qualifying conditions. We have such a narrow allowance for chronic pain (for example, the state only considers neuropathy worthy of being a qualifying condition) while people with radiculopathy, fibromyalgia, chronic pain syndrome, glaucoma, Crohn's disease, and many other conditions are left out. These are conditions I'm hearing regularly from people with referrals from their general practitioners saying they think they would be a great candidate for the program and while even though their doctor agrees I still have to turn them away due the restrictive nature of the conditions. Meanwhile, we have conditions like maple syrup urine disease that only affects 1 out of every 185,000 people world wide on the qualifying list. I consistently have to turn away numerous people a day due to them having a condition that would qualify in any other comprehensive medical cannabis program across the country but not here in the state of Texas. A state that prides itself on being the State of Personal Freedoms, at that. These patients are looking for relief that pills and surgeries aren't giving them and they deserve the freedom to choose what medicine they take based on what works for them. The desperation for relief in these patients voices sticks with me throughout the day. I urge the committee to open the program up to more qualifying conditions that real Texans are battling everyday.

Thank you for your time and consideration of my testimony.

Andrea Wimberley  
self and Texas Cannabis Coalition  
Katy, TX

I am 100% in support of HB 46. I am a patient of the TCUP, myself, and would like to see any improvements done to the law. I am also the Director of Texas Cannabis Coalition and would like to speak for the many people that come to our organization saying the same thing: "We want improvements to the TCUP!" What I hear the most is that people do not want the monopoly that has been created with Texas Original. They want a competitive market with competitive prices so they can actually afford their medicine. With insurance still not covering medication provided under the TCUP, patients simply cannot afford a 15 count of gummies for \$100 or a 30ml bottle of tincture for \$90. You are simply pushing patients to the black market to buy unregulated products that are more affordable to them. Please vote YES for HB 46 and improve the Texas Compassionate Use Program. Texas patients deserve better.

Leah Patrick  
Team Taylor for Brain Tumor Awareness  
Liberty Hill, TX

Good Morning. As a caregiver unable to attend, I'm asking for a real medical cannabis program that doesn't have limits, especially when treating brain tumors/cancers/PTSD. Unaffordable tinctures, gummies, chocolates, but no home grow or real plant flower, which is what is needed in our great state. Please, lives are on the line, and don't want to leave and become medical refugees, or made to look like criminals because we choose natural medicine over pharmaceutical medicines, which is wrong. It's in the Bible. Please help Texas patients have access to quality, safe, tested, and affordable to real plant medicines. My son's case is being researched, documented by doctors, and a 15 year survivor. For years we've asked. What do I tell my son who's finally in remission from brain cancer? It's a plant that there are no overdose deaths. Cannabis heals????  
There are over 107,000 registered TCUP patients in the CURT. What kind of history do you want told about Texas and how the disabled, legal MMJ patients are being treated?  
Please! Help!  
Sincerely,  
Leah Patrick

Kayli DeHaan  
Self  
Lubbock, TX

As a Texas resident, I fully endorse the use of cannabis for recreational and medical uses.

Chris Donofrio  
Self  
The Woodlands, TX

I SUPPORT HB 46.  
Please, pass it out of Committee.

Respectfully, Chris J Donofrio

Kevin A Hale

The Libertarian Party of Texas

Dallas, TX

#### Expanding Access to Compassionate Care

HB 46 strengthens the Texas Compassionate-Use Program by expanding the list of eligible medical conditions, allowing secure satellite locations for cannabis dispensing, and increasing the number of licenses issued. It also limits local government interference and clarifies the administration of low-THC cannabis by non-smoking methods, including pulmonary inhalation. These reforms improve access to relief for suffering Texans while reinforcing the right to make personal medical decisions without government obstruction.

#### Medical Autonomy Is a Core Liberty

The Libertarian Party of Texas (LPTexas) affirms that individuals must be free to seek the medical treatment they choose, without interference or coercion from the state (Platform § I.3.a). HB 46 supports this principle by empowering patients and physicians, removing unnecessary restrictions, and protecting medical decisions as private matters of conscience and consent.

#### Ending the War on Peaceful Patients

HB 46 brings Texas closer to ending the failed War on Drugs, which LPTexas opposes in all forms (Platform § I.3.c). By decriminalizing medical cannabis for a broader range of conditions and limiting state and local overreach, this bill helps protect the rights of patients, caregivers, and providers engaged in peaceful and consensual activity.

#### Restoring Choice in Health Care

LPTexas supports a free market in medicine, where the government does not dictate treatment options or limit access through monopolistic licensing and regulatory barriers. HB 46 increases competition and availability of low-THC cannabis, ensuring that Texans across all public health regions can access care that works for them (Platform § I.3.b).

#### Conclusion

The Libertarian Party of Texas supports HB 46 as a meaningful step toward medical freedom, patient choice, and the end of state violence against peaceful behavior. This bill respects bodily autonomy, promotes compassionate care, and limits government intrusion. We urge lawmakers to pass HB 46 and affirm Texans' right to make their own healthcare decisions.

Laura Spencer

self retired

San Antonio, TX

This is absolutely not a workable solution as it limits the distribution points in such a large state. As well, if Texas fully legalized all cannabis, the state would be able to to eliminate competition with street dealers, collect taxes and fund social services. Medical marijuana patients have been successfully self caring for ages and the difference in strains is no different than the differences in types of alcohol. The stigma on cannabis goes back to Nixon, Dan Patrick and the unsensibles have to get over themselves to allow people to be helped medically and to allow others to have a good time.

Nick Fallon  
Goodblend Texas  
Austin, TX

Goodblend is a trusted medical cannabis provider headquartered in Austin, Texas, dedicated to improving patient quality of life under a doctor's prescription. We appreciate the opportunity to provide written testimony in support of House Bill 46 and offer two items to consider as you move forward in the legislative process.

We greatly appreciate the inclusion of overnight storage at satellite locations in this bill. By allowing overnight storage, HB 46 will grant patients access in new parts of the state where it is currently just not feasible to deliver our products. Right now, each morning our team must drive from our headquarters in Austin to our pickup locations and sometimes our patients' homes to deliver pre-ordered products. For the products that are not picked up within the limited window, they are then driven back to Austin at the conclusion of each day. Overnight storage would eliminate unnecessary travel and subsequent delays. By keeping our products in a secure satellite location, we allow our patients the ability to pick up their medicine at times that are convenient for them.

We also fully support the inclusion of pulmonary inhalation in HB 46. Including pulmonary inhalation will greatly help patients with episodic conditions, which could strike at any time. In those cases, immediate relief is needed, and that is the benefit of the inhalation method.

One concern with HB 46 is section 487.104(e). We support increasing the number of licensees, however, we are concerned that subsection (e) could require the Department of Public Safety (DPS) to assign a licensee to only one public health region of the state. Our company has been in operation in Texas since the program's inception, building the infrastructure needed for growing, testing, and patient dispensing. We do not want DPS to assign our company a new public health region, causing us to move locations and not be able to serve our current patients.

We also want to bring attention to Section 169.004, which limits physicians to prescribing only a 90-day supply of low-THC cannabis. While we understand the intent to limit the amount of cannabis a patient may possess, we recommend placing primary responsibility for dispensing on the medical cannabis provider rather than on the physician. In other words, the physician should be allowed to write a prescription that remains valid for a full year, with the patient restricted to purchasing no more than a 90-day supply at a time. This change would help patients avoid unnecessary and costly visits, often not covered by insurance, which can exceed \$150 every 90 days, in addition to the cost of the medication.

As mentioned, we support HB 46 and believe that by addressing these key areas—satellite storage and inhalation—HB 46 broadens patient access while ensuring the therapeutic benefits of medical cannabis remain safe, regulated, and effective. We ask the Texas legislature to support HB 46.

Eric Kunish, Advocacy Co-chair  
NAMI Central Texas  
Austin, TX

Support this bill

Katharine Harris

Rice University's Baker Institute for Public Policy

Houston, TX

I am writing to express my support for HB 46, which would improve the Texas Compassionate Use Program (CUP).

The Drug Policy Program at Rice University's Baker Institute for Public Policy has a long history of supporting medical cannabis. We also understand and share many of lawmakers' concerns regarding the health implications of full cannabis commercialization.

HB 46 is not a legalization bill. It is a common-sense, compassionate approach to ensuring that Texans with serious medical conditions can relieve their suffering.

In its current form, the CUP is unworkable for thousands of state residents who could benefit from medical cannabis. There are just three licensed dispensaries, only two of which are operational. The prohibition on satellite locations creates wildly impractical business conditions, forcing the two Austin-based dispensaries to make single-day, roundtrip deliveries of medicine to patients across the state. Residents in many parts of the vast state simply do not have access.

HB 46 addresses this issue by instructing DPS to authorize 11 dispensing licenses. It also permits satellite locations, easing geographic hurdles to access.

HB 46 would also move from the current weight-based THC limit of 1% to a volumetric based limit of 20 mg per dose.

Volumetric dosing is standard not just to medical cannabis programs but to general medical practice. The bill would also allow for THC to be consumed via inhalation. This is critical for medical conditions that require rapid onset of cannabis's effects to relieve symptoms.

HB 46 does not expand qualifying conditions. The Texas Legislature is not a medical body and thus it is not well-positioned to determine whether a condition should qualify for medical cannabis. Given that, the Legislature may consider granting the Department of State Health Services authority to add qualifying conditions. This would allow evidence to guide medical decisions and would ensure that patients' access to medical cannabis is not beholden to the two-year legislative cycle.

Nichole Golamb

My 7 year old autistic daughter

Sheppard Afb, TX

My daughter has been registered with tcup for the past 2 years. She has been diagnosed with autism level 2 and seizures. She started self-harming when she was 4 years old. And the seizures happened three times a day. Once she started using medical cannabis, the seizure stopped completely. The self-harm stopped as well. She takes the oil and it takes about 60-90 minutes for it to take effect. She takes it regularly two times a day so that it's always in her system. Her seizures have stopped completely. Occasionally she has a very hard day and will have a severe meltdown that can last up to 2 hours. I believe a vaporizer would be able to help her at these times. Something that could give her instant relief instead of waiting 90 minutes watching her struggle. Cannabis has greatly improved her way of life. I write this as a conservative. I do not think that medication should be a conservative or liberal point of view. It should be provided for all who have disabilities or illnesses. thank you for taking the time to read this. I hope all will consider the families who struggle with severe autism and seizures and many other disabilities that are affecting our children and adults.

Marcus Ruark

Self

Austin, TX

Thank you, Mr. Chairman and members.

My name is Marcus Ruark and I am testifying on behalf of myself in favor of House Bill 46, and would like to thank Representative King for filing this bill.

I was the President of goodblend Texas, one of the current active licenses, from 2017 to 2021, where I was responsible for standing up and managing our Texas CUP operations. Additionally, I was the Global Head of Research and Development from 2018 to 2020 for goodblend's parent company, Parallel. I am no longer active in the Texas market, but I wanted to share some learnings from when the program started and evolved to where it is today.

Patient access is the most critical challenge. The Texas CUP statute specifically says DPS must "ensure reasonable statewide access" to the program. That is not easy to do in a state as large as Texas. DPS is a great partner to the program, and from my experience was always responsive and willing to listen to our point of view whenever we had an issue. DPS recently hired a consultant to provide recommendations for the program, and they specifically recommended significantly increasing the number of regulated licenses.

From my experience, the limited number of licenses is far and away the most pressing issue that has restricted patient access in Texas—and driven seniors, kids and veterans to seek unregulated products. States of our size typically have a minimum of 15 or more licenses. For example, Florida, which has been a successful medical program, commenced its program with 22 licenses.

The expansion of licenses would also reduce costs for patients. A medical grade product is much more costly to produce than the unregulated gas station hemp products patients are now accessing. With absolutely no competition—in reality, only two companies currently operate in Texas—there is no competition nor pressure on pricing, and adding more licenses will increase competition. Additionally, a significant increase in licenses will generate significant investment in the CUP, including investment in patient education and increased patient awareness of the CUP. Finally, in conjunction with HB 28, patients that need THC as medicine will come into the CUP, and the CUP must expand to be able to accommodate these new patients.

Also important to providing patients with effective medicine are adjustments to product requirements, including dosage and formulation updates.

Thankfully, HB 46 addresses these issues. However, I strongly recommend that the licensing language be changed to ensure there are sufficient licenses and locations in relation to population density, rather than just public health regions. Treating major metropolitan areas the same as rural areas will limit patient access in those cities. In sum, Texas needs more licenses to provide Texas patients with the medicine they need.

Thank you, and I'm happy to answer any questions.

Bianca Arvin

Self

Lago Vista, TX

SUPPORT 46. This kind of medical THC access would have made my father's life so much less painful before he died of complications from Parkinson's. I strongly SUPPORT HB 46 and hope Texas can finally ease more medical issues and pain for chronically ill patients.

Corrina Henry  
self  
San Angelo, TX

I am 56, a mother, was wife & professional and now a qualified medical marijuana patient here in TX. MMJ has improved my quality of life, after the accident, I was deemed disabled, since 2014. At current I can not completely fill my prescription each month, for two reasons: Texas' low thc means I have to consume more of the "gummy" and that upsets my stomach issues second it's because Texas Original charges the same price for Low THC as Colorado mmj program High THC products. I Chose to smoke but that is NOT available. We the People have already signed petitions to Decriminalize Marijuana so PLEASE explain to US (the people) Why YOU are standing in the way of Medical progress????

Tabitha Perez  
Self  
Austin, TX

Thc is the only drug as you all like to call it that no one has ever died of an overdose! Thc heals and it should not be illegal! Look at all the benefits that it can bring.

Michael Perez  
Myself  
San Antonio, TX

Texans deserve access instead of being pushed to other states or a black mart for THC. We have Thousands of studies showing the ppositive impacts of cannabis but we have yet to see a single death caused by thc. Not one. If this is about protecting kids then why allow beer and tobacco in the state and when those two kill more Texas children but yall openly allow items that are harmful to the individual and anyone around them leading up to death. Not only are you throwing away millions to billions in revenue for the state but you're taking away from people that have been in the state longer than you and have a more open mind than you. You mental health care system is god awful, and on every other level you've done nothing but disappoint

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Hearing Date: April 14, 2025 8:00 AM

David Bass, Founder, Texas Veterans for Medical Marijuana  
Texas Veterans for Medical Marijuana  
Killeen, TX

I am a CUP patient and I support HB 46 for the following reasons. First, we need satellite locations—actual CUP dispensaries. This will help the access issue. Second, adding licenses will also help the access issue. Third, vaped products will help me a lot. I'm an Army combat veteran diagnosed with PTSD. PTSD symptoms often occur unexpectedly and they come on fast and strong. Vaped cannabis has an immediate positive effect. Fourth, we need to change the formulation from 1% by weight to milligrams because milligrams is how all medicine is formulated and prescribed (by weight is how alcohol products are formulated).

Thank you for supporting HB 46 and our Texas Compassionate Use Program.

David E. Bass  
Texas Veterans for Medical Marijuana

John Sullivan  
Self  
Pflugerville, TX

As a registered participant in TCUP, I'm appreciate of the program in the treatment of my diabetic neuropathy that affects my entire right side and both feet.

I'm happy to see several improvements within the program including the addition of vape devices. Being diabetic, giving me the ability to avoid consuming sugar when I medicate is a huge win.

I'm also happy to see the measure being changed from a percentage to a dosage level in mg. I do believe the 20 mg dosage level is too low though. I would recommend instead allowing prescribers to set that limit for each individual patient. At a minimum, the cap should be 100mg. This shows doctors to tailor each patients treatment plan.

In tandem, increasing the total weight to 6g would align with this more appropriate dosing level.

I would also encourage an increase in the qualifying conditions. There are so many patients who could benefit from an expansion by providing pain relief when nothing else works and as an alternative to addictive opioids.

Jeremy Parker  
Self  
Fort Worth, TX

I am asking that chronic pain be added to the qualifying medical conditions list for medical cannabis. I have been a chronic pain patient over half of my life. Cannabis has helped keep the pain at bay.