Physician Certification Pattern Review

2022 Annual Report

October 1, 2020 - September 30, 2021

Physician Certification Pattern Review Panel Board of Medicine Board of Osteopathic Medicine





Board of Medicine and Board of Osteopathic Medicine Physician Certification Pattern Review 2022 Annual Report



Under section 381.986(4)(j), Florida Statutes, "The Board of Medicine and the Board of Osteopathic Medicine shall jointly create a physician certification pattern review panel that shall review all physician certifications submitted to the medical marijuana use registry. The panel shall track and report the number of physician certifications and the qualifying medical conditions, dosage, supply amount, and form of marijuana certified. The panel shall report the data both by individual qualified physician and in the aggregate, by county, and statewide."

The Physician Certification Pattern Review Panel (Panel) is responsible for reporting its findings and recommendations by January 1 of each year to the Governor, the President of the Senate, and the Speaker of the House of Representatives. This report analyzes data from October 1, 2020, through September 30, 2021.

Physician Certification Pattern Review Panel

Chair and Vice Chair

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Members

Jorge Gadea, D.O. William Kirsh, D.O. Jorge J. Lopez, M.D. Luz Pages, M.D. Michael Wasylik, M.D.

This report provides a summary of the data for the 2022 Annual Report, and comparisons between the data from the 2020 and 2021 Annual Reports. All physician certification data were extracted from the Medical Marijuana Use Registry (MMUR). Physician licensure information was extracted from the Division of Medical Quality Assurance (MQA) Licensure Database.

- 1. 2020 Annual Report: 12 months of data, October 1, 2018, through September 30, 2019.
- 2. **2021 Annual Report:** 12 months of data, October 1, 2019, through September 30, 2020.
- 3. 2022 Annual Report: 12 months of data, October 1, 2020, through September 30, 2021.

Overview of the 2022 Annual Report Contents

Date Range for 2022 Annual Report Data

October 1, 2020 through September 30, 2021

Purpose of the Panel

The Panel reviews physician certification patterns, produces an annual report including recommendations, and reports the findings to the Governor, the President of the Senate, and the Speaker of the House of Representatives by January 1 of each year, pursuant to section 381.986(4)(j), Florida Statutes (F.S).

Highlights of Trends in Physician Certifications

- 1. Based upon a review of the 2020 through 2022 annual reports, the data have reflected a steady increase in the number of physician certifications, physician certifications containing at least one order for smoking as a route of administration, the number of qualified patients, and qualified physicians.
 - Physician certifications: 460,469 to 664,779 to 975,267.
 - Certifications with smoke order(s): 136,861 to 584,227 to 916,366.
 - Qualified patients with certifications: 291,865 to 443,888 to 653,190.
 - Qualified physicians with certifications: 1,487 to 1,625 to 1,684.
- 2. The greatest number of certifications were issued by a small percentage of qualified physicians. This ratio has been increasing as more physicians see more patients, and more patients continue with subsequent certifications.
 - **2020**: 61% of certifications were issued by 9% of qualified physicians; 1,000 + certifications each. 2% of certifications were issued by 50% of qualified physicians; 1-49 certifications each.
 - 2021: 71% of certifications were issued by 12% of qualified physicians; 1,000 + certifications each.2% of certifications were issued by 47% of qualified physicians; 1-49 certifications each.
 - **2022**: 80% of certifications were issued by 16% of qualified physicians; 1,000 + certifications each. 1% of certifications were issued by 45% of qualified physicians; 1-49 certifications each.
- 3. The ordered average daily dose (mg) has shifted each year. This year, using a geometric mean calculation, three of the five routes of administration for low-THC cannabis had slightly lower average daily dose amounts. In contrast, medical marijuana average daily dose amounts have increased slightly across all routes of administration. Smoking as an appropriate route of administration remains consistently at the top of the limit allowed by statute, 2.5 oz. per order period.

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I. General Process for Medical Marijuana Certifications

1. Requirements for Qualified Physicians

Physicians qualify to order medical marijuana if they hold an active and unrestricted license as an allopathic physician under chapter 458, Florida Statutes, or an osteopathic physician under chapter 459, Florida Statutes, and successfully complete an approved 2-hour Continuing Medical Education course and examination. The course is repeated before the biennial license renewal deadline. All Florida-licensed physicians must provide information for a primary practice location. However, physicians may self-report as "Not Practicing", maintain an active license, and not provide a primary practice location. See Table 1.

Table 1. Total number of Florida-licensed physicians qualified to certify patients for medical marijuana.

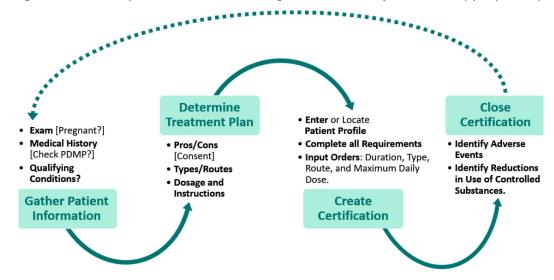
Reported Physician Practice Location Address	2020 Report ¹	2021 Report ¹	2022 Report ¹
In a Florida County	2,552	2,700	2,563
Not Practicing	34	39	32
Out of State	73	90	94

¹ Data cycle is October – September prior to January 1st publication date. See page i.

2. Requirements to Issue a Physician Certification

Figure 1 illustrates the general process to issue a physician certification. Currently, a physician certification can be issued only if the qualified physician conducted a physical examination while physically present in the same room as the patient, completed a full assessment of the patient's medical history, reviewed the Prescription Drug Monitoring Program (PDMP) database, and diagnosed the patient with at least one qualifying medical condition. Qualified physicians are responsible for the determination that the medical use of marijuana would likely outweigh the potential health risks for the patient. Physicians must complete the medical consent form and, when appropriate, submit required documentation as part of the certification process. See section 381.986(4)(a-g), F.S.

Figure 1. General process for determining if medical marijuana is an appropriate patient treatment.



Physicians must submit required documentation and maintain up to date certification information in the MMUR. When closing a certification, physicians must note adverse events or reductions in use of other

controlled substances. To continue to use medical marijuana as a treatment for the patient's medical condition(s), physicians and patients must complete the entire process as a new certification.

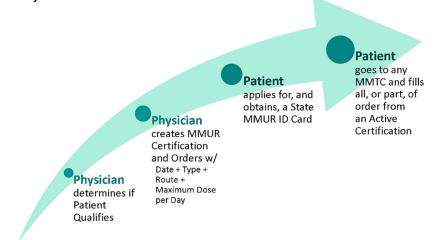
3. Requirements for Patients to Obtain Medical Marijuana

Figure 2 illustrates the general process for patients to obtain medical marijuana. Once a qualified physician determines that the medical use of marijuana would likely outweigh the potential health risks for the patient, a certification is created for the patient. Certifications contain orders with a maximum duration of 35 to 70 days depending upon route of administration (Edibles, Inhalation, Oral, Smoking, Sublingual, Suppository, or Topical).

Current certifications have a maximum duration of 210 days, or three consecutive 70-day orders (six consecutive 35-day orders for smoking). Patients are allowed one current (active) certification and one pending (future) certification. Each order has a start and end date. Physicians can modify current orders.

Once a physician certification has been issued, first-time qualified patients must obtain a Florida Medical Marijuana ID card. If medical marijuana as a treatment for the patient's medical condition is continued, the card must be renewed every 12 months. Orders can be filled at any Medical Marijuana Treatment Clinic (MMTC) in Florida.

Figure 2. General process for Florida residents who are interested in obtaining certifications for medical marijuana.



4. Reporting Physician Certification Data

- Physician certification data for this report were pulled directly from the Medical Marijuana Use
 Registry rather than vendor-generated reports used previously. This investment toward internal
 control of data gives the Office of Medical Marijuana Use (OMMU) more support for its Quality
 Assurance team, a critical feature in live data systems. Increased data access will allow rapid reporting
 by developing dashboards.
- Physician primary practice locations (addresses physicians provide in the Practitioner Profile) are collected on October 1 each year from the MQA licensure database.
- Section 381.986(4)(j), F.S., requires the Panel to report physician certification data "both by individual qualified physician and in the aggregate, by county, and statewide." Please see the separate document, "Data Tables for Physician Certification Pattern Review, 2022 Annual Report."

II. Trends in Physician Certifications

Table 2 and Figure 3 show the growth in number of physician certifications, individual patients, and qualified physicians. Patient counts reflect distinct individuals; patients may have more than one certification in each time period.

Table 2: Growth in physician certifications for medical marijuana use	Table 2	: Growth in	physician	certifications f	or medical	marijuana use.
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	2020 Report	2021 Report	2022 Report	Percent Change 2021 to 2022
Certifications	460,469	664,779	975,267	47% ↑
Individual Patients	291,865	443,888	653,190	47% ↑
Qualified Physicians with Certifications	1,487	1,625	1,684	4% ↑
All Qualified Physicians	2,556	2,700	2,563	5%↓

Figure 3. Number of physician certifications and patient counts in the 2020 Annual Report, 2021 Annual Report, and the 2022 Annual Report.

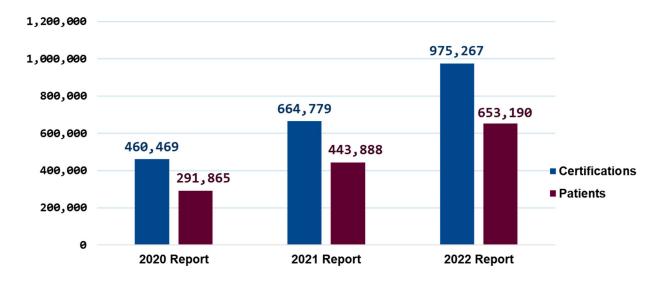


Table 3 provides information on how certification counts can vary by qualified physician. Only qualified physicians who have issued physician certifications during the time periods for the three data sets are included. The number of certifications has increased more than the number of qualified physicians issuing certifications, as can be seen in the average number of certifications per physician and the range in number of certifications per physician. This is illustrated in the three pie charts in Figure 4 and Figure 5.

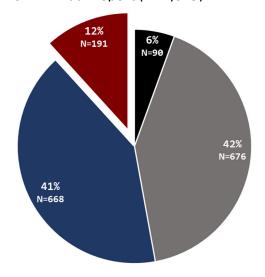
Table 3: Number of certifications in each data set.

	2020 Report	2021 Report	2022 Report
All Certifications	460,469	664,779	975,267
Average number of certifications per physician	130	410	579
Range in number of certifications per physician	1 to 8,838	1 to 16,604	1 to 27,694
Median	50	59	69
Mode	1	1	1
Individual Patients	291,865	443,888	653,190

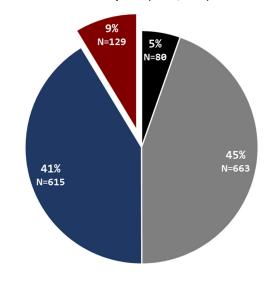
Figure 4. Trends in the percentage of physicians whose total number of certifications fall into one of four groups. Percentages are based on the number of physicians in each group divided by the total number of physicians in that data set.

- 1 certification per physician
- 2 to 49 certifications per physician
- 50 to 999 certifications per physician
- 1,000 or more certifications per physician

2021 Annual Report (N=1,625)



2020 Annual Report (N=1,487)



2022 Annual Report (N=1,684)

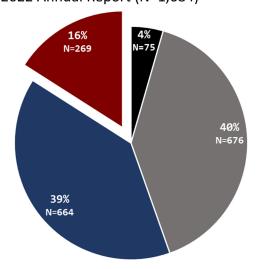
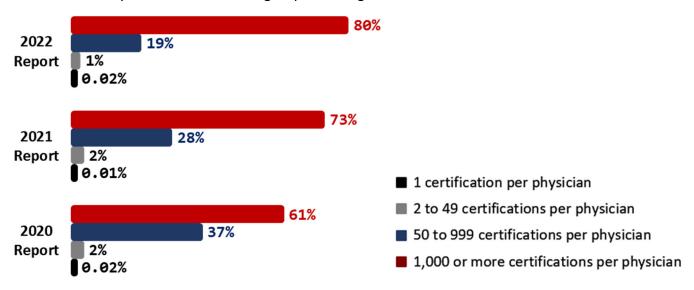
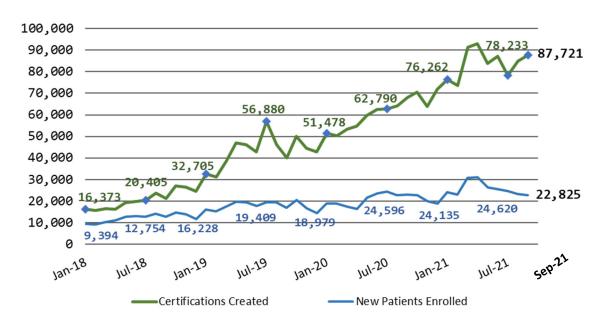


Figure 5. Percentage of certifications issued by physicians in each of the four groups. For example, in the 2022 Report, 0.02% of certifications issued were from physicians (N=75) who issued only 1 certification and 80% of certifications issued were from physicians (N=269) who issued 1,000 or more certifications. Physician counts in each group are in Figure 4.



Two changes occurred during the past four reporting periods: first, marijuana in a form for smoking became available for medical use on March 18, 2019, (Senate Bill 182) and second, edibles as a route of administration became available on August 27, 2020, when the Department of Health issued production standards. See Figure 6.

Figure 6. Month and year counts for certifications created and newly enrolled patients (no previous certifications) from January 1, 2018, through September 30, 2021. Point values for January and July are shown for each line. The September 2021 values are in black.



III. Trends in Patient Qualifying Condition

Physicians are required to determine that a patient's medical condition meets one of the qualifying conditions listed in section 381.986(2), F.S. The list is included in Table 4. Patients may have more than one qualifying condition recorded in the MMUR by a qualified physician and more than one certification.

Table 4: Trends in the total number and percentage of qualifying conditions reported in each data set. Conditions listed in **bold font** are the top three qualifying conditions reported by physicians.

	2020	Report	2021 Report		2022 F	2022 Report	
Qualifying Condition	Number		Number	Percent	Number		
(a) Cancer	36,749	6.9%	51,420	4.6%	61,408	3.8%	
(b) Epilepsy	8,698	1.6%	15,625	1.4%	18,524	1.1%	
(c) Glaucoma	7,867	1.5%	10,834	1.0%	13,507	0.8%	
(d) Positive status for human immunodeficiency virus (HIV)	3,861	0.7%	7,490	0.7%	9,192	0.6%	
(e) Acquired immune deficiency syndrome (AIDS)	626	0.1%	1,661	0.1%	2,031	0.1%	
(f) Post-traumatic stress disorder (PTSD)	128,030	23.9%	406,542	36.3%	627,521	38.7%	
(g) Amyotrophic lateral sclerosis (ALS)	408	0.1%	9,564	0.9%	10,167	0.6%	
(h) Crohn's disease	7,931	1.5%	23,006	2.1%	30,416	1.9%	
(i) Parkinson's disease	4,888	0.9%	8,192	0.7%	8,485	0.5%	
(j) Multiple sclerosis (MS)	6,760	1.3%	134,245	12.0%	177,696	11.0%	
(k) Medical conditions of the same kind or class as or comparable to those enumerated in paragraphs (a)-(j) ¹	135,088	25.2%	273,979	24.4%	438,690	27.1%	
(I) A terminal condition diagnosed by a physician other than the qualified physician issuing the physician certification	870	0.1%	2,717	0.2%	3,648	0.2%	
(m) Chronic nonmalignant pain	193,941	36.2%	175,904	15.7%	219,706	13.6%	
Total qualifying conditions reported:	535,	717	1,121	,179	1,620	,991	
Total number of certifications:	460,	469	664	,779	975	, 267	
Total number of individual patients:				,888		,190	

¹ Physicians are required to provide information on certifications under qualifying condition (k) same kind or class.

In September 2020, the Panel requested information on the top five medical conditions qualified physicians recorded most often in the MMUR under qualifying condition (k). In November 2020, the Panel asked for more detail on the medical conditions of patients certified under qualifying condition (f), PTSD.

Data for Tables 5, 6, and 7 are physician entries to the MMUR under qualifying condition (k). These data were collected separately from the data in previous tables and as such will vary slightly. For live data systems like the MMUR, each download is a snapshot in time; small differences in the data are expected. Data submitted using a paper copy of Form DH-MQA-5027 (rev. 02/2018) are not included.

Table 5. Patient medical conditions¹ reported by physicians for 1% or more of patients certified as qualifying condition (k) "medical conditions of the same kind or class as..." in the 2021 and 2022 Annual Reports.

Patient medical conditions by category using the World Health Organization's International Statistical	2021 Report	2022 Report
 Classification of Diseases and Related Health Problems One form of "anxiety" (e.g., generalized anxiety disorder, depression, insomnia, panic attacks, sleep disorders). 	Number Percent 27,517 44%	Number Percent 150,574 41%
 One or more symptoms, diseases, or disorders for "chronic pain from neuro or muscular degeneration or injury" (e.g., cervical or lumbar pain, degenerative disc/joint disease, muscle spasms, myopathic encephalopathy, restless leg syndrome, rheumatoid/osteoarthritis). 	25,237 43%	107,668 29%
3. Only "chronic pain" or "pain" reported.	4,073 7%	32,246 9%
4. One or more forms of "anxiety" AND one or more forms of "chronic pain from neuro or muscular degeneration or injury."	1,291 2%	22,435 6%
5. Two or more forms of "anxiety" as listed.	770 1%	35,316 10%
Others with 323 or less: digestive, respiratory, infectious disease, circulatory, genitourinary, genetic, skin and connective tissue, ophthalmological.	478 <1%	10,083 3%
Unable to determine	2,964 5%	12,994 4%
Number of medical conditions reported:	62,330	371,316
Number of qualifying condition (k) certifications:	270,817	438,690
Number of distinct patients in this table:	197,178	273,140
Number of physicians in this table: 1 Patients may have multiple certifications and 1 to 5 med	1,056	962

¹ Patients may have multiple certifications and 1 to 5 medical conditions.

In the MMUR, all certifications using qualifying condition (k) "medical conditions of the same kind or class as..." require identification of one or more qualifying conditions (a)-(j) the physician identifies as a match to the patient's medical condition(s).

Because a patient's certification may include multiple medical conditions, and/or multiple matches to qualifying conditions (a)-(j), the records were sorted to review only those certifications with *one other qualifying condition* (a)-(j).

In this reporting period, 78% (365,385 of 438,690) certifications met these conditions. See Table 6.

Table 6: Number and percentage of times each qualifying condition (a)-(j) was identified as being the "same kind, or class" as the patient's medical condition. Conditions listed in **bold font** are the top three reported by physicians. Included are counts for qualifying conditions (I) and (m) even though these choices do not meet the requirements for qualifying condition (k) outlined in statute.

	2022	Report
Qualifying Condition ¹	Number	Percent
(a) Cancer	4,064	1.03%
(b) Epilepsy	6,148	1.6%
(c) Glaucoma	379	0.1%
(d) Positive status for human immunodeficiency virus (HIV)	1,580	0.4%
(e) Acquired immune deficiency syndrome (AIDS)	186	0.05%
(f) Post-traumatic stress disorder (PTSD)	212,318	53.9%
(g) Amyotrophic lateral sclerosis (ALS)	328	0.1%
(h) Crohn's disease	12,372	3.1%
(i) Parkinson's disease	2,189	0.6%
(j) Multiple sclerosis (MS)	125,821	31.9%
(I) A terminal condition diagnosed by a physician other than the qualified physician issuing the physician certification	99	0.03%
(m) Chronic non-malignant pain	28,335	7.2%
Total <i>single</i> qualifying condition reported: Number of distinct patients in this table: Number of physicians in this table:		55,385 76,760 794

¹ Qualifying condition (k) patient medical condition(s) may align with more than one qualifying condition, only certifications with one (a)-(j) qualifying condition noted are shown here.

Table 7 provides an expansion of qualifying condition (k) data requested by the Panel in the 2021 recommendations to staff. The Panel was specifically interested in patient medical conditions physicians identified in certifications that identified qualifying condition (f) Post-traumatic stress disorder (PTSD) as being the same kind or class or as comparable to the patient medical condition.

There were 210,358 medical conditions reported in 232,580 certifications for 176,928 patients by 812 physicians that met the Panel's request. Medical conditions reported by physicians for 1% or more of patients with qualifying condition (k) certifications were grouped into six categories.

Table 7: Number and percentage of patient medical conditions physicians reported as being the "same kind, or class" as qualifying condition (f) Post-traumatic stress disorder (PTSD) under qualifying condition (k) requirements, October 1, 2020, through August 31, 2021. Medical conditions listed under qualifying condition (k) certifications that do not use (f) PTSD are provided for comparison.

Patient medical conditions ¹ by category using the		2022 An	nual Report	
World Health Organization's International Statistical	Liste	d PTSD	No PTSI	O listed
Classification of Diseases and Related Health Problems	Number	Percent	Number	Percent
 One form of "anxiety" (e.g., generalized anxiety disorder, depression, insomnia, panic attacks, sleep disorders). 	147,133	67.8%	1,857	1.3%
2. Two or more forms of "anxiety" as listed.	34,100	15.7%	626	0.4%
 One or more forms of "anxiety" AND one or more forms of "chronic pain from neuro or muscular degeneration or injury". 	16,945	7.8%	5,015	3.4%
4. Only "chronic pain" or "pain" reported.	4,451	2.1%	27,361	18.5%
5. One or more symptoms, diseases, or disorders for "chronic pain from neuro or muscular degeneration or injury" (e.g., cervical or lumbar pain, degenerative disc/joint disease, muscle spasms, myopathic encephalopathy, restless leg syndrome, rheumatoid/osteoarthritis).	3,345	1.5%	102,876	69.5%
6. Digestive (e.g., abdominal pain, anorexia loss of appetite, celiac disease, colitis, diabetes, diverticulitis, irritable bowel syndrome, nausea, pancreatitis, vomiting, wasting syndrome)	2,727	1.3%	6,821	4.6%
Combined total for medical conditions identified 201 times ¹ or less: circulatory, genetic, genitourinary, infectious disease, ophthalmological, respiratory, and/or skin and connective tissue.	1,657	0.8%	3,573	2.4%
Unable to determine	6,727	3.1%	5,889	4.0%
Number of medical conditions:	21	0,358	14	8,129
Number of distinct patients:	17	6,928	12	7,316

¹ Patients may have multiple certifications and 1 to 5 medical conditions.

IV. Trends in Orders by Type, Route, and Average Daily Dose

Data in this section refers to the total number of orders across all certifications, or to the average daily dose ordered per physician by route and type. Within each certification, the number of orders and the maximum daily dose in milligrams per day (mg) for any order, route, or type can vary.

Tables 8 and 9 provide the total number of orders by type and route for all certifications between October 1, 2018, and September 30, 2021. The increase in number of certifications increases the number of orders. Sublingual and Suppository order counts continue to increase more rapidly than other routes of administration.

Table 8: Total number of orders for low-THC cannabis, by route, in all certifications in each data set. Edibles as a route of administration became available August 27, 2020.

Route	2020 Report	2021 Report	2022 Report	Percent Change 2021 to 2022
Edibles	-	163,219	2,689,399	N/A ¹
Inhalation	308,841	1,704,359	2,687,859	58% ↑
Oral	328,842	1,739,225	2,716,443	56% ↑
Sublingual	80,910	867,547	2,450,970	183% 🕇
Suppository	6,704	120,352	344,009	186% 🕇
Topical	251,220	1,650,309	2,630,492	59% ↑

¹A full year comparison cannot be made.

Table 9: Total number of orders for medical marijuana, by route, in all certifications in each data set. Edibles as a route of administration became available August 27, 2020.

		· ·	,	
Route	2020 Report	2021 Report	2022 Report	Percent Change 2021 to 2022
Edibles	-	199,677	2,782,254	N/A¹
Inhalation	407,855	1,837,293	2,785,813	52% ↑
Oral	376,350	1,827,093	2,783,727	52% ↑
Sublingual	98,005	1,027,120	2,529,676	146% 🕇
Suppository	7,592	140,161	351,202	151% 🕇
Topical	292,757	1,726,214	2,703,104	57% ↑

¹A full year comparison cannot be made.

Tables 10 and 11 show the statewide average of the physician's average daily dose ordered in milligrams per day (mg) for six routes of low-THC cannabis and medical marijuana. With three full years of data, changes in trends were noted in the average daily dose amounts ordered.

Comparing the 2021 report with the 2022 report, and including outlier amounts, Low-THC cannabis average daily dose amounts ordered have increased for Edible, Sublingual and Suppository routes by 40%, 11%, and 17% respectively. In contrast, only the average daily dose amount ordered for the Inhalation route decreased in 2022, by 54%. For Oral and Topical routes, the average daily dose amount ordered changed little compared to the 2021 report, increasing by 1% or less.

For the 2021 report and 2022 report comparison of medical marijuana average daily dose amounts ordered, *including outlier* amounts, Edible and Suppository routes showed the greatest increases, by 38% and 24% respectively. Inhalation, Sublingual, and Topical routes increased less, 7%, 2%, and 9% respectively. Only the Oral route had a decreased average daily dose amount ordered, 21% less in the 2022 report compared to the 2021 report.

In order to retain all data observations and make comparisons without the skewing caused by outlier amounts, the data presented here also includes a geometric mean (GeoMean) calculation. A geometric mean uses all data observations to create a mean closer to the median. The usual average calculation (arithmetic mean) is provided for comparison, as are descriptive statistics for each data set, i.e., the range of numbers high to low, the median or middle point, and the mode or most frequently occurring number. See the definitions section for more detail on geometric mean calculations and outliers.

Table 10: Statewide average daily dose (mg) from all physician's average daily dose for low-THC cannabis, in Edible, Inhalation, and Oral forms, in each data set. Edibles as a route of administration became available August 27, 2020. Number of physicians with orders in each year is included in brackets.

	EDI	BLE	IN	NHALATION			ORAL	
Low-THC	2021	2022	2020	2021	2022	2020	2021	2022
	[920]	[1,475]	[1,196]	[1,393]	[1,459]	[1,234]	[1,436]	[1,509]
GeoMean	139	138	133	192	168	116	166	147
Average	190	266	741	625	288	688	246	244
Max	9,000	44,800	527,669	459,288	16,000	530,254	11,600	14,000
Min	6.3	4.2	4.0	7.0	8.3	1.0	5.0	5.0
Median	151	150	125	200	184	107	172	158
Mode	200	200	200	420	200	200	100	200

Table 11: Statewide average daily dose (mg) from all physician's average daily dose for Low-THC cannabis, in Sublingual, Suppository, and Topical forms, in each data set. The number of physicians with orders in each year is included in brackets.

	SUBLINGUAL			SUP	POSITORY	1	TOPICAL			
Low-THC	2020 [969]	2021 [1,237]	2022 [1,444]	2020 [311]	2021 [557]	2022 [720]	2020 [1,037]	2021 [1,343]	2022 [1,439]	
GeoMean	114	129	145	152	156	172	112	185	142	
Average	245	226	251	2,805	241	282	723	266	269	
Max	14,788	10,000	14,000	810,000	14,000	14,000	536,481	17,500	21,000	
Min	1.0	3.3	5.0	5.0	10.0	10.0	3.0	5.0	5.0	
Median	101	122	150	157	165	200	102	187	145	
Mode	200	200	200	200	200	200	200	420	200	

Table 12: Statewide average daily dose (mg) from all physician's average daily dose for medical marijuana, in Edible, Inhalation, and Oral forms, in each data set. Edibles as a route of administration became available August 27, 2020. The number of physicians with orders in each year is included in brackets.

Medical	EDI	BLE	11	NHALATION		ORAL			
Marijuana	2021 2022		2020	2021	2022	2020	2021	2022	
	[1,069]	[1,616]	[1,392]	[1,558]	[1,628]	[1,365]	[1,560]	[1,618]	
GeoMean	136	137	140	154	172	115	131	147	
Average	194	268	820	303	323	722	324	257	
Max	8,449	14,000	593,778	25,290	30,008	575,251	142,889	14,000	
Min	10.0	10.0	4.0	2.0	10.0	6.0	4.0	5.0	
Median	149.93	144	131	151	181	106	130	152	
Mode	200	200	200	200	200	200	200	200	

Table 13: Statewide average daily dose (mg) from all physician's average daily dose for medical marijuana, in Sublingual, Suppository, and Topical forms, in each data set. The number of physicians with orders in each year is included in brackets.

Medical	SL	SUBLINGUAL			PPOSITORY	1	TOPICAL			
Marijuana	2020	2021	2022	2020	2021	2022	2020	2021	2022	
, and a second	[1,084]	[1,365]	[1,555]	[409]	[634]	[805]	[1,191]	[1,410]	[1,525]	
GeoMean	110	126	143	131	148	163	111	125	139	
Average	312	250	254	184	210	261	741	244	265	
Max	55,909	25,000	14,000	2,400	4,800	14,000	558,287	20,800	14,000	
Min	3.0	3.0	5.0	5.0	2.0	5.0	6.0	8.0	5.0	
Median	100	120	148	140.00	160.00	197	102	119	138	
Mode	200	200	200	200	200	200	100	200	200	

V. Top Five Physicians by Reporting Measures

The following tables provide information on the top five physicians in each data set and include:

- 1. Number of certifications.
- 2. The number and physician's percentage of the top three qualifying conditions: (f) PTSD, (k) Medical Conditions of the Same Kind or Class as or Comparable to those enumerated in paragraphs (a)-(j), and (m) Chronic Nonmalignant Pain. Physician Specialty Area as provided in the Practitioner Profile in the MQA Licensure Database is included, if available.
- 3. The highest average maximum daily dose in milligrams per day (mg) by type and route.

Note:

- 1. By statute, allopathic and osteopathic physicians are not required to include or update specialties in the Practitioner Profile. Specialty information in Tables 15, 16, 17, 34, 35, and 36 is as of October 1, 2021, and may not reflect current information.
- 2. Physician license numbers in this section have been de-identified with a unique identifier (UID).
- 3. Patients may have more than one qualifying condition in a single certification, and more than one certification in a reporting period.

1. Physicians with the Highest Number of Certifications

Table 14: Top five physicians with the highest number of certifications in each data set.

	2020 Report				2021 Repo	ort	2022 Report			
UII	D	Number of Certifications	Number of Patients	UID	Number of Certifications	Number of Patients	UID	Number of Certifications	Number of Patients	
Al	U	8,838	6,147	AY	16,604	7,022	AY	27,694	10,913	
B	Α	8,763	6,059	AZ	12,971	8,192	ВА	16,207	11,040	
	J	5,665	3,390	ВА	12,724	8,932	AZ	14,840	10,473	
A	Χ	5,608	3,025	CY	6,412	4,777	DL	12,507	9,747	
A	V	5,184	4,035	ВВ	6,272	4,492	CY	9,960	6,788	

Table 15: Top five physicians with the highest number of certifications including "Qualifying Condition (f) PTSD."

	2020 Report	2021 Report	2022 Report
Range in Total Number of Certifications	3,532 to 8,838	1,929 to 6,962	7,839 to 24,095
Range in Percentage of Physician's Certifications including (f) PTSD	38% to 91%	78% to 95%	74% to 92%
Physician Specialty Area ¹	 Anesthesiology Family Medicine Family Practice, Hospice and Palliative Medicine Pediatrics Not Listed 	Family MedicinePediatricsFamily PracticeGeriatricsNot Listed	 Family Medicine Pediatrics Diagnostic Radiology Not Listed

¹Reference on page 13.

Table 16: Top five physicians with the highest number of certifications including "Qualifying Condition (k) Medical Conditions of the Same Kind or Class."

	2020 Report	2021 Report	2022 Report
Range in Total Number of Certifications	3,730 to 8,838	3,991 to 4,690	5,465 to 8,508
Range in Percentage of Physician's Certifications including (k) Same Kind or Class	49% to 71%	28% to 75%	31% to 79%
Physician Specialty Area ¹	 Family Practice, Hospice and Palliative Medicine Pain Management, Anesthesiology Pediatrics Not Listed 	 Emergency Medicine Family Medicine Family Practice, Hospice and Palliative Medicine Pediatrics Radiology-Diagnostic Not Listed 	 Family Medicine Pediatrics Radiation Oncology Hospice and Palliative Medicine Not Listed

¹Reference on page 13.

Table 17: Top five physicians with the highest number of certifications including "Qualifying Condition (m) Chronic Nonmalignant Pain."

	2020 Report	2021 Report	2022 Report
Range in Total Number of Certifications	3,721 to 8,763	3,724 to 16,604	5,364 to 18,766
Range in Percentage of Physician's Certifications including (m) Chronic Pain	51% to 91%	63% to 99.5%	44% to 97%
Physician Specialty Area ¹	Family MedicinePediatricsPlastic SurgeryNot Listed	Family MedicinePediatricsNot Listed	Family MedicinePediatricsNot Listed

¹Reference on page 13.

2. Physicians with the Highest Average Daily Dose - Low-THC Cannabis by Route

Table 18: Low-THC cannabis: EDIBLES, top five physicians with the highest average daily dose (mg). No data for the 2020 Report. Edibles as a route of administration became available August 27, 2020.

	2021 Report		2022 Report		
UID	Average Daily Dose (mg)	Number of Orders	UID	Average Daily Dose (mg)	Number of Orders
I	9,000	14	AT	44,800	3
DF	3,000	24	DZ	14,000	30
W	1,547	761	EA	10,650	6
DG	1,500	11	DT	10,000	3
ВН	1,400	79	I	9,000	207
Geometr	ric mean¹: 139 mg/	'day	Geometric mean¹: 138 mg/day		

¹ No outliers removed.

Table 19: Low-THC cannabis: INHALATION, top five physicians with the highest average daily dose (mg).

	2020 Report			2021 Report		2022 Report		
UID	Average Daily Dose (mg)	Number of Orders	UID	Average Daily Dose (mg)	Number of Orders	UID	Average Daily Dose (mg)	Number of Orders
Α	527,669	302	W	459,288	9,828	Υ	16,000	1
В	60,000	3	Х	30,408	5	DZ	14,000	30
Χ	12,680	15	AA	11,600	23	EA	10,650	6
AA	10,500	3	Y	11,467	3	AT	9,600	3
Е	8,417	107	Α	10,000	6	I	9,000	207
Geometr	ric mean¹: 133 mg/	day	Geometric mean ¹ : 192 mg/day			Geometric mean ¹ : 168 mg/day		

¹ No outliers removed.

Table 20: Low-THC cannabis: ORAL, top five physicians with the highest average daily dose (mg).

	2020 Report			2021 Repor	t	2022 Report			
UID	Average Daily Dose (mg)	Number of Orders	UID	Average Daily Dose (mg)	Number of Orders	UID	Average Daily Dose (mg)	Number of Orders	
Α	530,254	302	AA	11,600	23	DZ	14,000	30	
В	60,000	3	Α	10,000	6	EA	10,650	6	
AA	14,000	3	I	7,746	114	I	9,000	207	
I	8,331	29	DB	5,789	534	DM	8,657	1,480	
С	5,922	420	AC	4,002	9	AJ	6,643	11	
Geometr	ic mean¹: 116 mg/o	day	Geometric mean¹: 166 mg/day			Geometric mean ¹ : 147 mg/day			

¹No outliers removed.

Table 21: Low-THC cannabis: SUBLINGUAL, top five physicians with the highest average daily dose (mg).

	2020 Report			2021 Report	:	2022 Report			
UID	Average Daily Dose (mg)	Number of Orders	UID	Average Daily Dose (mg)	Number of Orders	UID	Average Daily Dose (mg)	Number of Orders	
А	14,788	302	Α	10,000	6	DZ	14,000	30	
AA	14,000	3	DC	10,000	1	AJ	11,000	4	
G	6,330	4	I	9,182	11	EA	10,650	6	
Н	6,000	2	DD	7,000	3	I	9,000	199	
ВС	5,780	9	DE	4,750	23	DM	8,697	1,473	
Geometri	ic mean¹: 114 mg/c	lay	Geometric mean¹: 129 mg/day			Geometric mean¹: 145 mg/day			

¹ No outliers removed.

Table 22: Low-THC cannabis: SUPPOSITORY, top five physicians with the highest average daily dose (mg).

	2020 Report			2021 Report		2022 Report			
UID	Average Daily Dose (mg)	Number of Orders	UID	Average Daily Dose (mg)	Number of Orders	UID	Average Daily Dose (mg)	Number of Orders	
А	810,100	302	AF	14,000	3	DZ	14,000	30	
K	1,600	15	I	9,400	5	AM	12,029	21	
V	1,500	68	DF	2,727	11	I	9,000	195	
М	1,470	809	ВН	1,239	128	DO	8,750	60	
С	1,420	420	AG	1,200	6	DM	8,703	1,472	
Geometr	ic mean¹: 152 mg/c	day	Geometric mean¹: 156 mg/day			Geometric mean¹: 172 mg/day			

¹ No outliers removed.

Table 23: Low-THC cannabis: TOPICAL, top five physicians with the highest average daily dose (mg).

	2020 Report			2021 Report			2022 Repor	t
UID	Average Daily Dose (mg)	Number of Orders	UID	Average Daily Dose (mg)	Number of Orders	UID	Average Daily Dose (mg)	Number of Orders
Α	536,481	302	AJ	17,500	3	AJ	21,000	8
D	10,733	33	AC	10,605	4	DH	20,000	2
I	8,370	29	Α	10,000	6	DZ	14,000	30
С	5,934	420	I	7,713	111	EA	10,650	6
ВС	5,780	9	DE	4,109	27	I	9,000	207
Geometric mean¹: 112 mg/day Geometric mean¹: 185 mg/day Geometric mean¹: 142 mg/day					g/day			

¹ No outliers removed.

3. Physicians with the Highest Average Daily Dose – Medical Marijuana by Route

Table 24: Medical marijuana: EDIBLES, top five physicians with the highest average daily dose (mg). No data for Edibles in the 2020 Report. Edibles as a route of administration became available August 27, 2020.

2021 Report			2022 Report		
UID	Average Daily Dose (mg)	Number of Orders	UID	Average Daily Dose (mg)	Number of Orders
AP	8,449	184	DZ	14,000	30
AO	3,500	2	EB	11,700	6
DF	2,900	30	ΑT	11,226	12
DK	2,500	3	EA	10,650	6
DH	2,000	2	DM	8,680	1476
Geome	etric mean¹: 136 mg	/day	Geom	etric mean¹: 137 n	ng/day

¹ No outliers removed.

Table 25: Medical marijuana: INHALATION, top five physicians with the highest average daily dose (mg).

	2020 Report			2021 Repoi	rt	2022 Report		
UID	Average Daily Dose (mg)	Number of Orders	UID	Average Daily Dose (mg)	Number of Orders	UID	Average Daily Dose (mg)	Number of Orders
Α	593,778	302	Х	25,290	6	ED	30,008	3
AT	127,216	6	DC	21,000	1	DZ	14,000	30
0	35,000	2	AJ	14,000	3	EA	10,650	6
BD	21,000	3	AL	13,073	11	DQ	10,000	3
Х	14,497	15	AA	11,635	23	EB	9,754	13
Geometric mean ¹ : 140 mg/day			Geometric mean¹: 154 mg/day			Geometric mean ¹ : 172 mg/day		

¹No outliers removed.

Table 26: Medical marijuana: ORAL, top five physicians with the highest average daily dose (mg).

	2020 Report			2021 Report	:	2022 Report		
UID	Average Daily Dose (mg)	Number of Orders	UID	Average Daily Dose (mg)	Number of Orders	UID	Average Daily Dose (mg)	Number of Orders
Α	575,251	302	AU	142,889	14,023	DZ	14,000	30
Р	93,132	28	AJ	14,000	3	EA	10,650	6
AT	22,480	6	АА	11,635	23	DM	8,878	1477
AA	14,000	3	Α	10,000	6	DI	8,245	22
Q	12,158	29	DH	9,657	26	AC	7,000	3
Geometric mean ¹ : 115 mg/day			Geometric mean¹: 131 mg/day			Geometric mean¹: 147 mg/day		

¹ No outliers removed.

Table 27: Medical marijuana: SUBLINGUAL, top five physicians with the highest average daily dose (mg).

	2020 Report 2021 Report				:	2022 Report			
UID	Average Daily Dose (mg)	Number of Orders	UID	Average Daily Dose (mg)	Number of Orders	UID	Average Daily Dose (mg)	Number of Orders	
BE	55,909	34	DH	25,000	2	DZ	14,000	30	
Α	55,223	302	AJ	17,500	2	AJ	11,000	4	
AA	14,000	3	Α	10,000	6	EA	10,650	6	
BD	9,650	3	DC	10,000	1	AM	10,583	92	
BF	4,326	78	DD	7,000	3	DM	8,715	1470	
Geometri	c mean¹: 110 mg/da	ау	Geometric mean¹: 126 mg/day			Geometric mean¹: 143 mg/day			

¹ No outliers removed.

Table 28: Medical marijuana: SUPPOSITORY, top five physicians with the highest average daily dose (mg).

	2020 Report			2021 Report			2022 Report		
UID	Average Daily Dose (mg)	Number of Orders	UID	Average Daily Dose (mg)	Number of Orders	UID	Average Daily Dose (mg)	Number of Orders	
U	2,400	3	AQ	4,800	4	DZ	14,000	30	
BG	1,450	331	DI	3,500	2	AM	12,029	21	
С	1,420	420	DF	2,750	12	DO	8,750	60	
ВН	1,350	350	DJ	1,750	6	DM	8,721	1469	
BI	1,200	31	U	1,620	5	DC	3,298	87	
Geometric mean¹: 131 mg/day			Geometric mean¹: 148 mg/day			Geome	etric mean¹: 163 m	g/day	

¹ No outliers removed.

Table 29: Medical marijuana: TOPICAL, top five physicians with the highest average daily dose (mg).

	2020 Report			2021 Report		2022 Report		
UID	Average Daily Dose (mg)	Number of Orders	UID	Average Daily Dose (mg)	Number of Orders	UID	Average Daily Dose (mg)	Number of Orders
Α	558,287	302	DH	20,800	10	DZ	14,000	30
Х	50,400	15	AJ	17,500	1	AJ	12,500	8
BD	20,600	3	Α	10,000	6	EA	10,650	6
ВЈ	10,599	128	AT	9,600	6	AM	10,583	92
U	8,400	3	AK	6,006	272	AT	9,600	3
Geometric	c mean¹: 111 mg/da	ч	Geometr	ic mean¹: 125 mg/	'day	Geome	tric mean¹: 139 mg	/day

¹ No outliers removed.

VI. Marijuana in a Form for Smoking

Certifications with orders for smoking began on March 18, 2019, when Senate Bill 182 (2019) was signed into law by Governor Ron DeSantis, <u>section 381.986 (4)(c)</u>, <u>Florida Statutes</u>.

Table 30: Number of certifications that contain at least one order for smoking in each data set.

All Certifications with at Least One Order for Smoking	2020 Report 6+ months March 18, 2019 through September 30, 2019 136,861	2021 Report 12 months October 1, 2019 through September 30, 2020 584, 227	2022 Report 12 months October 1, 2020 through September 30, 2021 916, 366
Average number of certifications with smoking per physician	141	425	616
Range in total number of certifications with smoking per physician	1 to 4,140	1 to 15,460	1 to 27,378
Median	21	51	67
Mode	1	1	1
All Patients (with smoking certifications)	128,040	400,892	621,598

Table 31: All smoking orders, percentage of total qualified physicians with orders for smoking, and descriptive statistics (in ounces ordered) in each data set.

	2020 Report 6+ months March 18, 2019 through September 30, 2019	2021 Report 12 months October 1, 2019 through September 30, 2020	2022 Report 12 months October 1, 2020 through September 30, 2021
All Orders for Smoking	745,804	3,048,773	5,265,078
Percentage of Physicians with Orders for Smoking	65%	85%	88%
GeoMean ounces ordered	2.25	2.30	2.35
Average ounces ordered	2.32	2.35	2.37
Max	2.50	2.50	2.50
Min	0.03	0.13	0.74
Median	2.50	2.50	2.50
Mode	2.50	2.50	2.50

Table 32: Trends in the total number and percentage of qualifying conditions reported in certifications containing at least one order for smoking. Patients may have more than one qualifying condition per certification. Conditions listed in **bold font** are the top three qualifying conditions reported by physicians.

	6 Mar	20 Report + months ch 18, 2019 through er 30, 2019	12 Octol	21 Report 2 months per 1, 2019 through er 30, 2020	12 Octol	2 Report 2 months oer 1, 2020 through er 30, 2021
Qualifying Condition	Number	Percent	Number	Percent	Number	Percent
(a) Cancer	-	5.7%	40,726	4.1%	53,425	3.5%
(b) Epilepsy	2,217		13,012	1.3%	16,713	1.1%
(c) Glaucoma	2,075	1.3%	9,101	0.9%	12,381	0.8%
(d) Positive status for human immunodeficiency virus (HIV)	1,226	0.8%	6,498	0.7%	8,573	0.6%
(e) Acquired immune deficiency syndrome (AIDS)	182	0.1%	1,407	0.1%	1,790	0.1%
(f) Post-traumatic stress disorder (PTSD)	41,421	26.5%	369,522	37.5%	598,439	39.4%
(g) Amyotrophic lateral sclerosis (ALS)	73	0.1%	8,614	0.9%	9,510	0.6%
(h) Crohn's disease	2,256	1.4%	19,650	2.0%	28,201	1.9%
(i) Parkinson's disease	713	0.5%	5,451	0.6%	6,538	0.4%
(j) Multiple sclerosis (MS)	1,648	1.1%	116,889	11.9%	163,704	10.8%
(k) Medical conditions of the same kind or class as or comparable to those enumerated in paragraphs	45,904	29.4%	245,377	24.9%	415,385	27.3%
(I) A terminal condition diagnosed by a physician other than the qualified physician issuing the physician certification	179	0.1%	2,039	0.2%	3,283	0.2%
(m) Chronic nonmalignant pain	49,929	31.9%	146,620	14.9%	201,646	13.3%
Total qualifying conditions reported:	156,	193	1,121	,179	1,519	,588
Total number of certifications:	136,	861	664	,779	916	,419
Total number of patients: (with smoking certifications)	128,	040	443	,888	621	,598

Table 33: Top five physicians with the highest number of certifications containing at least one order for smoking.

	2020 Report 6+ months March 18, 2019 through September 30, 2019			2021 Report 12 months October 1, 2019 through September 30, 2020			October 1, 2	022 Report 12 months 2020 through aber 30, 2021
UID	Number of Certifications	Number of Patients	UID	Number of Certifications	Number of Patients	UID	Number of Certifications	Number of Patients
ВА	4,140	3,916	AY	15,460	6,135	AY	27,378	10,872
AX	2,233	2,048	AZ	12,958	4,063	ВА	15,956	10,947
AZ	2,212	2,205	ВА	12,665	5,401	ΑZ	14,838	10,472
AU	2,119	2,037	CY	6,163	2,542	DL	12,508	9,749
CL	2,004	1,862	ВВ	6,090	2,497	CY	9,837	6,747

Table 34: Top five physicians with the highest number of certifications containing at least one order for smoking and including "Qualifying Condition (f) PTSD."

	2020 Report 6+ months March 18, 2019 through September 30, 2019	2021 Report 12 months October 1, 2019 through September 30, 2020	2022 Report 12 months October 1, 2020 through September 30, 2021
Range in Total Number of Certifications	963 to 4,140	3,891 to 13,447	7,836 to 23,853
Range in Percentage of Physician's Certifications including (f) PTSD	52% to 99%	79% to 92%	74% to 92%
Physician Specialty Area ¹	AnesthesiologyFamily MedicinePediatricsNot Listed	Family MedicinePediatricsNot Listed	Family MedicinePediatricsDiagnostic RadiologyNot Listed

¹Reference on page 13.

Table 35: Top five physicians with the highest number of certifications containing at least one order for smoking and including "Qualifying Condition (k) Medical conditions of the same kind or class."

	2020 Report 6+ months March 18, 2019 through September 30, 2019	2021 Report 12 months October 1, 2019 through September 30, 2020	2022 Report 12 months October 1, 2020 through September 30, 2021
Range in Total Number of Certifications	1,541 to 2,233	3,915 to 4,471	5,437 to 8,416
Range in Percentage of Physician's Certifications including (k) Same Kind or Class	50% to 73%	29% to 75%	31% to 79%
Physician Specialty Area ¹	 Family Practice, Hospice and Palliative Medicine Pain Management, Anesthesiology Pediatrics Not Listed 	 Family Medicine Family Practice, Hospice and Palliative Medicine Pediatrics Radiology-Diagnostic Not Listed 	 Family Medicine Pediatrics Radiation Oncology Hospice and Palliative Medicine Not Listed

¹Reference on page 13.

Table 36: Top five physicians with the highest number of certifications containing at least one order for smoking and including "Qualifying Condition (m) Chronic nonmalignant pain."

	2020 Report 6+ months March 18, 2019 through September 30, 2019	2021 Report 12 months October 1, 2019 through September 30, 2020	2022 Report 12 months October 1, 2020 through September 30, 2021
Range in Total Number of Certifications	963 to 4,140	3,703 to 11,192	5,284 to 18,596
Range in Percentage of Physician's Certifications including (m) Chronic Pain	56% to 99.7%	48% to 99.4%	44% to 97%
Physician Specialty Area ¹	Family MedicinePediatricsPlastic SurgeryNot Listed	Family MedicinePediatricsNot Listed	Family MedicinePediatricsNot Listed

¹Reference page 13.

VII. Summary of the 2022 Annual Report

Physician certifications created for qualified patients each month show a cumulative increase for each year of reporting. For example, certifications doubled from January 2018 compared to January 2019 (16,373 to 32,705), then increased by 74% (to 51,478) for January 2020. From January 2020 to January 2021, certifications per month increased more slowly, 48% (to 76,262). The most recent monthly count was 87,721 for September 2021.

New patient enrollment each month initially increased quickly, by 73% from January 2018 compared to January 2019 (9,394 to 16,228) but has been more stable since then. Enrollments increased by 17% (to 18,979) for January 2020, and by 27% (to 24,135) for January 2021. New patient enrollments per month peaked in April 2021 (30,997). The most recent monthly count was 22,825 for September 2021.

The average daily dose ordered for low-THC cannabis and medical marijuana has changed slightly since the 2021 report. The amounts ordered for marijuana in a form for smoking remain consistent with previous reports.

Data Tables for Physician Certifications contain detailed certification data for individual qualified physicians, and in the aggregate, by county and statewide, and is provided as a separate document.

Panel Recommendations from 2021 Report

Request to the Legislature:

 Amend section 381.986(3), F.S., to require qualified physicians to update their Practitioner Profile, and include every secondary practice location where the qualified physician issues certifications for a qualified patient to receive medical marijuana.

Requests to Panel Support Staff:

- Include distribution details for physicians by categories such as number of certifications, average daily dose, and specialty areas.
 - While OMMU has made a substantial investment toward internal control of data, detailed distribution (dispensation) data across multiple variables were not available for the 2022 report.
- Include details on medical conditions the physician identified as being of the same kind or class as or comparable to Post Traumatic Stress Disorder (PTSD).
 - This information is provided in Section III, Trends in Patient Qualifying Condition, page 9.

VIII. Panel Recommendations for 2022

Requests to Panel Support Staff:

- 1. Consider comparable data from other states or jurisdictions for future reports, if applicable.
- 2. Present data using the geometric mean versus the average in future reports.
- 3. Include an emphasis on the unreliability of physician primary practice location information.
- 4. Provide a break-down of physicians with certifications greater than 1,000 or more into smaller groups (adding 2,000 and 5,000 or more).
- 5. Change the data cycle from October 1 through September 30 to July 1 through June 30 to align with the fiscal year in future reports.

IX. Terms and Definitions

Average (AVG) daily dose is the average of all *maximum* daily doses ordered within a physician certification by route of administration and type (low-THC cannabis or medical marijuana).

Average ounces are the average of all "total ounces per 35-day order period of marijuana in a form for smoking" by certification, physician, county, or state.

Cannabidiol (CBD) for low-THC cannabis ordered by route(s) in the Medical Marijuana Use Registry is measured in milligrams per day.

Chronic nonmalignant pain means pain that is caused by a qualifying medical condition or that originates from a qualifying medical condition and persists beyond the usual course of that qualifying medical condition.

County is based on the primary practice location (address) physicians provided in the Medical Quality Assurance Licensure Database.

Dose is the milligrams (mg) per day for each route of administration a physician recommends in the Medical Marijuana Use Registry as part of a certification for marijuana. The "total mg/day" is the sum of all doses for a given form and type of marijuana ordered. All dose data entered was used.

Form is a term referenced in section 381.986, F.S., to describe the routes of administration.

Geometric mean is a method for describing the central tendency of a set of numbers by finding the product of their values. An arithmetic mean adds numbers instead of multiplies them. The geometric mean is used when there are large fluctuations in a data set to prevent outliers from skewing result, yet still included those data points in the analysis.

Low-THC cannabis means a plant of the genus *Cannabis*, the dried flowers of which contain 0.8 percent or less of tetrahydrocannabinol and more than 10 percent of cannabidiol weight for weight; the seeds thereof; the resin extracted from any part of such plant; or any compound, manufacture, salt, derivative, mixture, or preparation of such plant or its seeds or resin that is dispensed from a medical marijuana treatment center.

Marijuana means all parts of any plant of the genus *Cannabis*, whether growing or not; the seeds thereof; the resin extracted from any part of the plant; and every compound, manufacture, salt, derivative, mixture, or preparation of the plant or its seeds or resin, including low-THC cannabis, which are dispensed from a medical marijuana treatment center for medical use by a qualified patient.

Medical marijuana treatment centers (MMTCs) are licensed by the state to grow, process, and dispense marijuana to qualified patients who have certifications and identification cards issued by the Office of Medical Marijuana Use.

Medical Marijuana Use Registry (MMUR) is a secure, electronic, online medical marijuana use registry for physicians, patients, and caregivers that is accessible to law enforcement agencies, qualified physicians, and medical marijuana treatment centers.

Medical use means the acquisition, possession, use, delivery, transfer, or administration of marijuana authorized by a physician certification. The term does not include:

1. Possession, use, or administration of marijuana that was not purchased or acquired from a medical marijuana treatment center.

- 2. Possession, use, or administration of marijuana in the form of commercially produced food items other than edibles or of marijuana seeds.
- 3. Use or administration of any form or amount of marijuana in a manner that is inconsistent with the qualified physician's directions or physician certification.
- 4. Transfer of marijuana to a person other than the qualified patient for whom it was authorized or the qualified patient's caregiver on behalf of the qualified patient.
- 5. Use or administration of marijuana in the following locations:
 - a. On any form of public transportation, except for low-THC cannabis not in a form for smoking.
 - b. In any public place, except for low-THC cannabis not in a form for smoking.
 - c. In a qualified patient's place of employment, except when permitted by his or her employer.
 - d. In a state correctional institution, as defined in section 944.02, F.S., or a correctional institution, as defined in section 944.241, F.S.
 - e. On the grounds of a preschool, primary school, or secondary school, except as provided in section 1006.062, F.S.
 - f. In a school bus, a vehicle, an aircraft, or a motorboat, except for low-THC cannabis not in a form for smoking.
- 6. The smoking of marijuana in an enclosed indoor workplace is defined in section 386.203(5), F.S.

Medical Quality Assurance (MQA) Licensure Database contains information on health care practitioners in the state of Florida licensed under chapter 458, F.S., and chapter 459, F.S. The information includes an indicator for physicians who have qualified to order low-THC cannabis and medical marijuana for qualified patients.

Office of Medical Marijuana Use (OMMU) is charged with writing and implementing the Florida Department of Health rules for the use of marijuana, overseeing the statewide Medical Marijuana Use Registry, and licensing Florida businesses to cultivate, process, and dispense marijuana to qualified patients. More information about the Medical Marijuana Use Registry is available online at the Office of Medical Marijuana Use website: https://knowthefactsmmj.com/

Orders refer to consecutive order periods, up to three, each with a maximum number of 70 days. Within the 70-day period, physicians can choose to order 10 options: low-THC cannabis and/or medical marijuana in up to five different routes of administration.

Physician certifications for marijuana in a form for smoking may have up to six order periods, each with a maximum number of 35 days.

Outliers are individual data observations (such a mg/dose or total supply amount in mg) that are an abnormal distance from all other data observations in the set. Observations that fell more than 1.5 interquartile ranges below the first quartile or above the third quartile were considered outliers and removed from calculations for average daily dose and supply totals.

Physician certification means a qualified physician's authorization for a qualified patient to receive marijuana and a marijuana delivery device from a medical marijuana treatment center.

Physician county data is pulled from the most recent data available relative to the end of the reporting period. "Not Practicing" physicians had an active status in the MQA Licensure database when county information was accessed; "Out of State" physicians had out-of-state addresses but were otherwise listed as active status.

Practitioner Profile information is drawn from the Division of Medical Quality Assurance's Licensure Database and contains physician information that is posted in the online License Verification search.

Qualified patient means a resident of this state who has been added to the Medical Marijuana Use Registry by a qualified physician to receive marijuana or a marijuana delivery device for medical use and who has a qualified patient identification card.

Qualified physician means a person who holds an unrestricted license as an allopathic physician under chapter 458, F.S., or as an osteopathic physician under chapter 459, F.S., and is in compliance with the physician education requirements of subsection (3) of 381.986, F.S.

Qualifying medical conditions are required for physician certification. A patient must be diagnosed with at least one of the following conditions to qualify to receive marijuana or a marijuana delivery device:

- (a) Cancer
- (b) Epilepsy
- (c) Glaucoma
- (d) Positive status for human immunodeficiency virus (HIV)
- (e) Acquired immune deficiency syndrome (AIDS)
- (f) Post-traumatic stress disorder (PTSD)
- (g) Amyotrophic lateral sclerosis (ALS)
- (h) Crohn's disease

- (i) Parkinson's disease
- (j) Multiple sclerosis (MS)
- (k) Medical conditions of the same kind or class as or comparable to those enumerated in paragraphs (a)-(j)
- (I) A terminal condition diagnosed by a physician other than the qualified physician issuing the physician certification
- (m) Chronic nonmalignant pain

Routes of administration is defined in emergency rule 64ER20-31. F.A.R., as the appropriate method for the usable product to be taken into the body of the qualified patient, as certified by a qualified physician.

Smoking means burning or igniting a substance and inhaling the smoke. As permitted by section 381.986(4)(c), F.S., qualified physicians may determine that smoking is an appropriate route of administration for a qualified patient.

Supply is the total amount in milligrams (mgs) for all orders within a certification (daily dose multiplied by the number of days ordered) for all routes of administration other than smoking. For smoking, supply is the total amount in ounces (oz) for all orders within a certification.

Terminal condition means a progressive disease or medical or surgical condition that causes significant functional impairment, is not considered by a treating physician to be reversible without the administration of life-sustaining procedures and will result in death within one year after diagnosis if the condition runs its normal course.

Tetrahydrocannabinol (THC) for medical marijuana ordered by route(s) in the MMUR is measured in milligrams per day.

Type is low-THC cannabis or medical marijuana.



Your feedback is important to us. If you have questions or suggestions about this report, please let us know.

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