

CAREGIVER PARTICIPATION AND LICENSING FEE PROJECTION

Estimating Connecticut enrollment from Maine per-capita data, and the revenue a cultivating caregiver license would generate.

Connecticut Cannabis Reform Project | August 2026 | CT DCP registrant and quarterly certification data · Maine OCP 2025 Annual Report

CONNECTICUT ALREADY HAS THE CAREGIVER POPULATION

Connecticut has 2,591 registered caregivers serving 30,505 patients — 8.49 caregivers per 100 patients, against Maine's 1.37. Proportionally, Connecticut already has 6.2 times more caregivers per patient than Maine.

What Connecticut lacks is a licensed tier. A caregiver may already assist a patient with cultivation under § 21a-421j-39(b) of the department's policies and procedures, but only at that patient's residence and, absent an enumerated family relationship, for one patient. The participation base is already built, already vetted, and already registered with the Department. This bill does not create a new population; it gives an existing one something to do.

That matters for the fiscal note. Estimating uptake for a brand-new license type requires guesswork. Here the denominator is known: 2,591 people have already completed registration and chosen to serve as caregivers under a program that pays them nothing and offers them no license, no separate site and no scale.

1. Maine's Caregiver Participation, Per Capita

Maine's Office of Cannabis Policy publishes the caregiver count annually. Applying Maine's population of 1,405,012 gives a per-capita participation rate; the patient series from 2018 forward gives caregivers per 1,000 patients.

Year	Registered caregivers	Per 1,000 residents	Per 1,000 patients
2014	2,161	1.538	—
2015	2,921	2.079	—
2016 (peak)	3,257	2.318	—
2017	2,993	2.130	—
2018	2,462	1.752	53.6
2019	2,596	1.848	39.7
2020	3,046	2.168	31.7
2021	3,032	2.158	28.8
2022	2,276	1.620	21.4
2023	1,763	1.255	16.2
2024	1,677	1.194	15.2
2025 (current)	1,539	1.095	13.7

Maine's caregiver count peaked at 3,257 in 2016 and has fallen by more than half since. The Office of Cannabis Policy's own caregiver survey attributed the decline mainly to oversupply and falling prices after adult-use launched, rather than to regulatory burden. Maine's caregiver sector is contracting. The difference is that Maine's patient count rose through the same period.

2. Applying Maine's Rate to Connecticut

Maine benchmark year	ME caregivers per 1,000	Implied CT caregivers	Comment
2025 (current)	1.095	4,026	Post-contraction rate
2023	1.255	4,611	—
2022	1.620	5,953	—
2020	2.168	7,967	Pre-contraction
2016 (all-time peak)	2.318	8,519	Ceiling, not a forecast

WHY THESE FIGURES ARE DISCOUNTED BEFORE USE

Maine's caregivers are quasi-commercial: 286 operate retail storefronts and the sector moves roughly \$260 million in sales, implied by \$14,276,222 of sales tax at the 5.5% rate. The Connecticut bill authorizes no stores, no sales, and a hard cap of five designated patients per caregiver. Applying Maine's rate undiscounted would imply Connecticut building a commercial caregiver industry that this bill expressly does not permit. Every estimate below is discounted for that difference.

Measure	Connecticut	Maine 2025	Reading
Caregivers per 1,000 residents	0.705	1.095	CT is at 64% of Maine's rate
Caregivers per 100 patients	8.49	1.37	CT has 6.2× more per patient

3. Participation Estimate — Two Independent Methods

Method 1 (bottom-up). Connecticut's 2,591 existing registered caregivers are the eligible pool; estimate the share converting to a paid cultivation license. **Method 2 (top-down).** Maine's per-capita rate applied to Connecticut's population, discounted for the closed-loop design.

Method	Assumption	Caregivers	Annual fees
M1	10% of existing convert	259	\$132,401
M1	20% of existing convert	518	\$264,802
M1	33% of existing convert	855	\$437,076
M1	50% of existing convert	1,295	\$662,004
M2	Maine 2025 rate × 15%	604	\$308,765
M2	Maine 2025 rate × 25%	1,007	\$514,778
M2	Maine 2025 rate × 40%	1,610	\$823,032
M2	Maine 2025 rate, undiscounted	4,026	\$2,058,091

THE DEFENSIBLE BAND: 500 TO 1,300 CULTIVATING CAREGIVERS

The two methods converge there — roughly 20% to 50% of Connecticut's existing caregiver registrants, or 15% to 30% of Maine's per-capita rate. That range produces \$130,000 to \$660,000 a year in license fees against the nothing the state collects today. The central estimate is the moderate case: **855 caregivers, \$437,076 a year.**

The weighted average fee of \$511.20 assumes a mix skewed to small growers: 50% at Tier A (\$240), 20% Tier B (\$480), 12% Tier C (\$720), 8% Tier D (\$960), 6% Tier E (\$1,200), 4% Tier F (\$1,500). The tier schedule matches Maine's published structure, whose \$240 tier is likewise defined as six mature and twelve immature plants.

4. Ten-Year Revenue With a Realistic Ramp

Licenses do not appear all at once. Assuming a five-year ramp of 25%, 55%, 80%, 95% and 100% of target, then holding steady:

Year	Conservative (518)	Moderate (855)	Strong (1,295)
Year 1	\$66,200	\$109,269	\$165,501
Year 2	\$145,641	\$240,392	\$364,102
Year 3	\$211,841	\$349,661	\$529,603
Year 4	\$251,562	\$415,222	\$628,904
Year 5	\$264,802	\$437,076	\$662,004
Years 6–10 (each)	\$264,802	\$437,076	\$662,004
Ten-year total	\$2,264,054	\$3,737,000	\$5,660,134

WHERE THIS MONEY GOES UNDER THE BILL

Section 5(b) divides every fee. Fifty per cent goes to the Department for administration of the licensing and testing programs, capped at the Department's documented cost, with any excess transferred onward. Fifty per cent goes to the Connecticut Compassionate Care Fund, which assists patients and caregivers who demonstrate financial need. **No portion of any fee may be used for enforcement.** On the moderate case, that is roughly \$218,500 a year to the Department and \$218,500 a year to patient assistance.

5. Enrollment Effect — How Many Patients Return

Connecticut has lost 23,495 patients from the October 2021 peak of approximately 54,000. Each cultivating caregiver may serve up to five designated patients under the bill.

Cultivating caregivers	Patients served (×5)	Share of lost patients
259	1,295	5.5%
518	2,590	11.0%
855	4,275	18.2%
1,295	6,475	27.6%
1,610	8,050	34.3%

THIS IS A PARTIAL REMEDY

Even the strong case — 1,295 caregivers serving five patients each — reaches 6,475 patients, or 28% of the 23,495 Connecticut has lost. The bill does not reverse the collapse. It slows the decline and serves the patients least able to help themselves. The figures above are stated as a floor, not a projection of full recovery.

Who Those Patients Are

Across 126,056 approved certifications from 2022-Q4 through 2026-Q1:

Age band	Approved certifications	Share	Cumulative
18–24	4,682	3.7%	3.7%
25–34	17,408	13.8%	17.5%
35–44	26,523	21.0%	38.6%
45–54	24,608	19.5%	58.1%
55–64	25,951	20.6%	78.7%
65–74	20,857	16.5%	95.2%
75–84	5,287	4.2%	99.4%
85+	740	0.6%	100.0%

41.9% of approved patients are 55 or older and 21.3% are 65 or older — the patients least able to build and run an indoor grow, pay Connecticut electricity rates to operate it, and manage a harvest. This matches the population the Cannabis Ombudsman described in 2025 as predominantly veterans and senior citizens. The leading certifying conditions are post-traumatic stress disorder (59,205), chronic pain of at least six months (31,676) and cancer (11,315).

Approved certifications are themselves falling: 9,169 in 2022-Q4 to 8,060 in 2026-Q1, a 12.1% decline. The pipeline is shrinking, not only the registry. Over the same period the number of certifying practitioners rose 22.3%, from 1,643 to 2,009.

6. Sensitivity — Fee Level Against License Count

Annual fee revenue at each combination. In this range the fee level matters more than the count, because the eligible population is small.

Average fee	259	518	855	1,295	1,610
\$240	\$62,160	\$124,320	\$205,200	\$310,800	\$386,400
\$400	\$103,600	\$207,200	\$342,000	\$518,000	\$644,000
\$511 (current tiers)	\$132,349	\$264,698	\$436,905	\$661,745	\$822,710
\$650	\$168,350	\$336,700	\$555,750	\$841,750	\$1,046,500
\$800	\$207,200	\$414,400	\$684,000	\$1,036,000	\$1,288,000
\$1,000	\$259,000	\$518,000	\$855,000	\$1,295,000	\$1,610,000
\$1,200	\$310,800	\$621,600	\$1,026,000	\$1,554,000	\$1,932,000

7. Reading These Numbers

Four points govern how the estimate should be interpreted.

- **The uptake base is known, not hypothetical.** Connecticut already has 6.2 times more caregivers per patient than Maine. The bill activates a registered population rather than creating one, which is why the estimate does not rest on speculative adoption.
- **855 caregivers and \$437,076 is the central estimate.** It sits where both methods converge and is derivable from either direction.
- **The Maine discount is explicit.** Maine's rate implies 4,026 caregivers. This model projects 855 because the Connecticut bill bars retail sales and caps caregivers at five patients.
- **The recapture ceiling is 28%.** The bill addresses roughly a quarter of the enrollment loss at the strong end of the range, and the analysis does not claim more than that.

8. Sources and Assumptions

Input	Value	Source / status
CT caregivers, patients, certifiers	2,591 / 30,505 / 2,009 (Jul 2026)	CT DCP registrant data — verified
CT approved certifications	126,056, 2022-Q4 to 2026-Q1	CT DCP quarterly summary — verified
CT peak enrollment	~54,000 (Oct 2021); 23,495 lost	CT DCP historic series — verified
Maine caregiver series 2014–2025	3,257 peak / 1,539 current	Maine OCP 2025 Annual Report — verified
Maine patient certifications	45,940 → 112,547 (2018–2025)	Maine OCP 2025 Annual Report — verified
Populations	CT 3,675,069 / ME 1,405,012	Census 2024 estimates — verify before filing

Input	Value	Source / status
Fee tiers \$240–\$1,500	Matches Maine's published schedule	Verified — 22 M.R.S. § 2425-A(2)(B); 18-691 C.M.R. ch. 2 § 1
License mix 50/20/12/8/6/4	Weighted average \$511.20	Assumption — no Connecticut precedent
Conversion rates 10–50%	259–1,295 caregivers	Assumption — the central uncertainty
Closed-loop discount 15–40%	604–1,610 caregivers	Assumption
Five-year adoption ramp	25/55/80/95/100%	Assumption
Five patients per caregiver	Bill cap	Drafting choice, not data

WHAT THIS DOCUMENT DOES NOT ADDRESS

Fee revenue is one side of the ledger. Medical cannabis is exempt from the sales, excise and municipal taxes under CGS § 12-412(120), so patients shifting out of the adult-use market reduce state tax receipts, and the Department requires administrative resource to run the registry. Both offsets are modeled in the companion document, *Fiscal Model and Maine Comparison*. These figures are not net revenue to the General Fund.

Figures marked as assumptions are illustrative and adjustable in the companion spreadsheet model. This is policy analysis, not a fiscal note; the Office of Fiscal Analysis produces the official estimate. This document is advocacy and policy analysis. It is not legal advice and its author is not an attorney. Statutory citations were verified against the current General Statutes on August 9, 2026.