

Patient Tennessee Notice and Acknowledgment

MINNESOTA MEDICAL CANNABIS PROGRAM

The Minnesota Medical Cannabis Patient Registry is an online system operated by the Minnesota Department of Health's (MDH) Office of Medical Cannabis for the Minnesota Medical Cannabis Program. When MDH collects private information from you, MDH must let you know why it is asking for the information, how the information will be used, and who will see the information. This notice can help you decide whether to give information about yourself to MDH.

You can choose to provide the information, or not. However, you will not be able to enroll in the Minnesota Medical Cannabis Program without supplying information about yourself.

Purpose and Intended Use

The information requested by the Medical Cannabis Patient Registry will be used to communicate with you, establish your eligibility and identity, and for MDH to evaluate information on patient demographics, treatment options, clinical outcomes, and quality-of-life outcomes. MDH will use this information to administer the program and create reports on the benefits, risks, and outcomes experienced by medical cannabis patients.

In addition, your information may be shared with qualified researchers outside MDH. In this case, your name and all other information that could identify you is NOT shared.

The health care practitioner who certifies you into the program is required by law to report your health records related to your qualifying medical condition to MDH. The health care practitioner may release these records to MDH without your written consent.

Classification of Data Provided

The information in the Patient Registry is considered private data on individuals, which means information is not available to the public, but you will be able to access your own information. Information about you may also be available to others who are authorized to receive it to do their jobs. If you choose to create an online Patient Registry account, your username, password, and answers provided to security questions as part of the registration process are also considered private data and are not available to others.

Requirements to Provide

You are not legally required to provide any of the requested information.

If you have any questions or concerns about why you are being asked for information or how it will be used, please contact us by email at health.cannabis@state.mn.us or call 651-201-5598 (metro) or 844-879-3381 (non-metro)

Consequences of Supplying or Refusing to Supply Information

The information requested in the Patient Registry will determine whether you can be in the Minnesota Medical Cannabis Program. If you do not answer the questions asked, you will not be allowed to enroll in the Minnesota Medical Cannabis Program. Enrollment in the Patient Registry is required before medical cannabis can be sold to you. If you do not provide all the requested information, there could be a delay or denial of your initial or renewal application.

Other Persons or Entities Authorized to Receive Your Information

You may authorize other people to see your Medical Cannabis Patient Registry information, including your enrollment status, medical cannabis purchasing history, and other records you provide to the Registry.

Pharmacy staff at dispensaries will ask you for additional information. They will also be able to see and use information in your Patient Registry to figure out the type and amount of medical cannabis that might work best for you.

The health care practitioner who certifies your qualifying medical condition for the Medical Cannabis Patient Registry may see your information in the Patient Registry.

If you have a designated caregiver, parent, legal guardian, or spouse acting as caregiver attached to your Patient Registry account, your caregiver may see information in your Patient Registry account. Your caregiver may also access and/or complete your required Patient Self-Evaluation (PSE) form prior to medical cannabis purchases.

Law enforcement officials may access the information you provide to the Medical Cannabis Patient Registry only if they obtain a search warrant or other court order.

Acknowledgement

By creating a Medical Cannabis Patient Registry account, you are indicating that you have read and understand this notice and the intended use of the private information you will provide.

Signed

Date

Printed Name of Patient

Minnesota Department of Health
Office of Medical Cannabis
PO Box 64975
St. Paul, MN 55164-0975
651-201-5598

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health.cannabis@state.mn.us

www.health.state.mn.us/medicalcannabis

2/7/2023

To obtain this information in a different format, call: 651-201-5598.