

Health Care Practitioner Registration Acknowledgment/Consent/Disclosure

I certify that I am Minnesota licensed doctor of medicine, a Minnesota licensed physician assistant acting with the scope of authorized practice, or a Minnesota licensed advanced practice registered nurse.

I agree to continue treatment of the patients' qualifying medical conditions that conforms to acceptable and prevailing medical practice standards for all patients whose medical conditions I certify.

I agree to report health records of all patients whose qualifying medical conditions I certify for the medical cannabis patient registry throughout the ongoing treatment of the patient to the Minnesota Department of Health (MDH) in a manner determined by MDH, and to otherwise comply with all requirements developed by MDH.

The information in the patient registry contains private information about individuals that must be treated in a manner that preserves the privacy of the individuals. I agree to:

- access the registry information only to provide services for registered patients;
- ensure all staff with access to the registry understand and comply with all patient privacy protections;
- take appropriate steps to ensure no registered patient's information is released through unintentional or accidental disclosure;
- take appropriate steps to ensure that login names and passwords are not available to those not authorized to access the patient registry;
- not enter inaccurate or false information either knowingly or negligently; and
- report immediately to MDH Office of Medical Cannabis (OMC) staff any privacy incident regarding the information in the patient registry of which I suspect or become aware. "Privacy incident" means any improper and/or unauthorized use or disclosure the patient registry information, improper or unauthorized access to or alteration of that information, and incidents in which the confidentiality of the information maintained in the registry has been breached.

I will report any suspected serious health effect caused by medical cannabis within 24 hours of my knowledge of the occurrence by completing a form on the MDH OMC Office of Medical Cannabis website. A "serious health effect" is any unexpected or harmful physical or psychological reaction following the use of medical cannabis that results in death, admission to a hospital, or medical treatment beyond basic first aid or mental health care.

I have been informed of and understand that:

- data in patient files maintained by MDH and a health care practitioner are private data on individuals as defined in the Minnesota Government Data Practices Act, Minnesota Statutes section 13.02, subdivision 12, but may be used for purposes of complying with the Minnesota Government Data Practices Act and complying with a request from the Minnesota Legislative Auditor or the Minnesota State Auditor in the performance of official duties. Additionally, pursuant to Minnesota Statutes section 152.27, Subd. 2(a)(7), MDH may conduct research and studies based on data from health records submitted to the registry program and submit reports on intermediate or final research results to the Minnesota Legislature and major scientific journals. A health care practitioner who knowingly refers patients to a manufacturer or to a designated caregiver, who advertises as a manufacturer, or who issues certifications while holding a financial interest in a manufacturer is guilty of a misdemeanor and may be sentenced to imprisonment for not more than 90 days or by payment of a fine of not more than \$1,000, or both.

A health care practitioner who knowingly falsely certifies a patient as suffering from a qualifying medical condition, who knowingly submits false information to MDH, or who knowingly violates any statute, rule, or MDH requirement with regards to the Medical Cannabis program may be removed from the patient registry and, in addition, any patients certified by that health care practitioner may also be disqualified from enrollment in the patient registry.

Minnesota Department of Health
Office of Medical Cannabis
P.O. Box 64882
St. Paul, MN 55164-0882
(651)201-5598 Metro or (844)879-3381 Non-Metro
mn.gov/medicalcannabis

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