<u>Title 15: Mississippi State Department of Health</u>

Part 22: Medical Marijuana

Subpart 5: Issuance of Medical Marijuana Identification Cards

Chapter 1 MEDICAL MARIJUANA IDENTIFICATION CARDS

<u>Subchapter 1 Types of Medical Marijuana Identification Cards or Registration and</u> Associated Fees

- Rule 5.1.1 The following types of medical marijuana identification cards or registration will be issued (in a form and manner set by the Department) upon satisfaction of all application criteria:
 - a. Patient Identification Cards
 - b. Caregiver Identification Cards
 - c. Caregiver Institution/Program Identification Cards
 - d. Licensed Entity Identification Cards
 - i. Owner
 - ii. Operator
 - iii. Officer
 - iv. Agent
 - v. Employee
 - vi. Contractor
 - e. Physician Registration

SOURCE: Mississippi Constitution Initiative Measure #65 Sections 5(1) and (2)

Rule 5.1.2 At a minimum, Identification Cards issued by the Department will identify the type of card, valid dates of the card, the legal name and date of birth of the cardholder, and a unique identification number.

SOURCE: Mississippi Constitution Initiative Measure #65 Sections 5(1) and (2)

Rule 5.1.3 The initial fee for Patient Identification Cards is as follows:

- a. If the applicant is currently receiving assistance through SNAP, TanF, or WIC, the identification card fee is reduced to \$25.00. State issued evidence of current enrollment in SNAP, TanF or WIC must be submitted as part of the application process. If evidence of current enrollment is not provided, the full fee will be applicable.
- b. For all other participants, the identification card fee is \$50.00.
- c. All fees are nonrefundable. Fees must be paid in the manner set forth by the Department.

Rule 5.1.4 The renewal fee for Patient Identification Cards is as follows:

- a. If the applicant is currently receiving assistance through SNAP, TanF, or WIC, the identification card fee is reduced to \$25.00. State issued evidence of current enrollment in SNAP, TanF or WIC must be submitted as part of the application process. If evidence of current enrollment is not provided, the full fee will be applicable.
- b. For all other participants, the identification card fee is \$50.00.
- c. All fees are nonrefundable. Fees must be paid in the manner set forth by the Department.

SOURCE: Mississippi Constitution Initiative Measure #65 Sections 5(1) and (2)

Rule 5.1.5 The initial fee for Caregiver Identification Cards is as follows:

- a. If the applicant is currently receiving assistance through SNAP, TanF, or WIC, the identification card fee is reduced to \$25.00. State issued evidence of current enrollment in SNAP, TanF or WIC must be submitted as part of the application process. If evidence of current enrollment is not provided, the full fee will be applicable.
- b. For all other participants, the identification card fee is \$50.00.
- c. All fees are nonrefundable. Fees must be paid in the manner set forth by the Department.

SOURCE: Mississippi Constitution Initiative Measure #65 Sections 5(1) and (2)

Rule 5.1.6 The annual renewal fee for Caregiver Identification Cards is as follows:

- a. If the applicant is currently receiving assistance through SNAP, TanF, or WIC, the identification card fee is reduced to \$25.00. State issued evidence of current enrollment in SNAP, TanF or WIC must be submitted as part of the application process. If evidence of current enrollment is not provided, the full fee will be applicable.
- b. For all other participants, the identification card fee is \$50.00.
- c. All fees are nonrefundable. Fees must be paid in the manner set forth by the Department.

SOURCE: Mississippi Constitution Initiative Measure #65 Sections 5(1) and (2)

Rule 5.1.7 The initial fee for all Licensed Entity Identification Cards is \$50.00. All fees are nonrefundable. Fees must be paid in the manner set forth by the Department.

Rule 5.1.8 The renewal fee for all Licensed Entity Identification Cards is \$50.00. All fees are nonrefundable. Fees must be paid in the manner set forth by the Department.

SOURCE: Mississippi Constitution Initiative Measure #65 Sections 5(1) and (2)

Rule 5.1.9 Both initial and renewal fees for all medical marijuana identification cards may be waived by the Department in the event of extenuating circumstances approved by the Department.

SOURCE: Mississippi Constitution Initiative Measure #65 Sections 5(1) and (2)

Subchapter 2 Patient Identification Cards

Rule 5.2.1 Patient Identification Cards will only be issued by the Department when all application and physician certification criteria is met. Upon issuance of the identification card, the applicant is recognized as a qualified patient of the medical marijuana program.

SOURCE: Mississippi Constitution Initiative Measure #65 Sections 5(1) and (2)

Rule 5.2.2 Patient Identification Cards issued by the Department are valid for one (1) year from the date of issuance unless a lesser timeframe is otherwise indicated by the physician issuing the physician certification or circumstances determined by the Department outlined in Rule 5.2.6 of this subchapter.

SOURCE: Mississippi Constitution Initiative Measure #65 Sections 5(1) and (2)

Rule 5.2.3 Utilizing the same process outlined in Rule 5.3.1, Qualified Patients may apply for renewal of their Patient Identification Card no later than one (1) year from the date of issuance or last renewal of the Qualified Patient's Identification Card.

SOURCE: Mississippi Constitution Initiative Measure #65 Sections 5(1) and (2)

Rule 5.2.4 When there a change in the patient's name, address, or designated caregiver, the patient is responsible for notifying the Department within ten (10) calendar days of the change.

SOURCE: Mississippi Constitution Initiative Measure #65 Sections 5(1) and (2)

Rule 5.2.5 If a patient no longer has a debilitating medical condition that qualifies him/her for the medical marijuana program, the patient is responsible for notifying the Department and returning/surrendering his/her patient identification card within ten (10) calendar days of receiving such information from his/her physician.

- Rule 5.2.6 Patient Identification Cards may be suspended or revoked for the following:
 - a. The patient provided false information to the Department;
 - b. The patient uses his/her card to obtain marijuana for another individual; and/or,
 - c. The certifying physician has terminated the physician certification.

Subchapter 3 Application to Participate in the Medical Marijuana Program as a Qualified Patient

- Rule 5.3.1 To obtain a Qualified Patient Identification Card, an applicant must submit (in a form and manner determined by the Department) the following information:
 - a. Full legal name and any aliases, such as a nickname (e.g., Bill as a nickname for William);
 - b. Date of birth;
 - c. Current physical address;
 - d. Current telephone number and/or email address;
 - e. Identification issued by the State of MS driver's license, state-issued ID
 - f. Current photograph
 - i. clear, color photograph of the head and top of shoulders;
 - ii. be an image in a .jpg, .png, or .gif digital image format no larger than 3 mb in size;
 - iii. be taken in the last sixty days to reflect the applicant's appearance;
 - iv. be taken in front of a plain white or off-white background;
 - v. be taken in full-face view directly facing the camera at eye level with nothing obscuring the face;
 - vi. must not be digitally enhanced to change the appearance of the applicant (e.g. use of "filters").
 - g. Physician certification (as set forth by the Department);
 - h. Identification card fee (see Rules 5.1.3 and 5.1.4);
 - i. An attestation, signed and dated by the applicant, that the information provided is true and correct;
 - j. An attestation, signed and dated by the applicant, pledging not to divert medical marijuana or medical marijuana products to any individual or entity; and,

- Rule 5.3.2 To obtain a Qualified Patient Identification Card for a Minor, a Legal Guardian or
 Parent, on behalf of the minor applicant, must submit (in a form and manner
 determined by the Department) the following information:
 - a. The full legal name and aliases, such as a nickname (e.g., Bill as a nickname for William) of the applicant;
 - b. The applicant's date of birth;
 - c. A copy of the applicant's birth certificate;

- d. A copy of any court orders pertaining to custody of the minor applicant (including, but not limited to custody order through chancery or youth court);
- e. The applicant's current physical address;
- f. The applicant's telephone number and/or email address if the applicant has a telephone number and/or email address and that telephone number and/or email address is different from one provided by the applicant's parent(s) or legal guardian(s);
- g. The full legal name(s) of the applicant's parent(s) or legal guardian(s);
- h. The date(s) of birth of the applicant's parent(s) or legal guardian(s);
- i. The current physical address(es) of the applicant's parent(s) or legal guardian(s);
- j. The current telephone number(s) and/or email address(es) of the applicant's parent(s) or legal guardian(s);
- k. Identification issued by the State of MS driver's license, state-issued ID;
- 1. Current photograph
- i. clear, color photograph of the head and top of shoulders;
- ii. be an image in a .jpg, .png, or .gif digital image format no larger than 3 mb in size;
- iii. be taken in the last sixty days to reflect the applicant's appearance;
- iv. be taken in front of a plain white or off-white background;
- v. be taken in full-face view directly facing the camera at eye level with nothing obscuring the face;
- vi. must not be digitally enhanced to change the appearance of the applicant (e.g. use of "filters").
- m. Physician certification (as set forth by the Department);
- n. Identification card fee (see Rules 5.1.3 and 5.1.4);
- o. An attestation that the information provided is true and correct;
- p. Parental or legal guardian consent for the minor to participate in the medical marijuana program;
- q. An attestation, signed and dated by the applicant and parent(s)/legal guardian(s), pledging not to divert medical marijuana or medical marijuana products to any individual or entity; and,

Rule 5.3.3 For all qualified patients who are minors, parental consent or consent of the legal guardian(s) is required.

SOURCE: Mississippi Constitution Initiative Measure #65 Sections 5(1) and (2)

Subchapter 4 Caregiver Identification Cards

Rule 5.4.1 Caregiver Identification Cards will only be issued by the Department when all application criteria is met. Upon issuance of the identification card, the applicant is recognized as a caregiver to a patient or patients of the medical marijuana program. The Department will not issue a caregiver identification card before the

Department issues the designated caregiver's qualifying patient's identification card.

SOURCE: Mississippi Constitution Initiative Measure #65 Sections 5(1) and (2)

Rule 5.4.2 Applicants are prohibited from having a disqualifying criminal conviction 15 Miss.

Admin. Code, Part 22, Subpart 2, Rule 2.1.3.

SOURCE: Mississippi Constitution Initiative Measure #65 Sections 5(1) and (2)

Rule 5.4.3 Caregiver Identification Cards issued by the Department are valid for one (1) year from the date of issuance.

SOURCE: Mississippi Constitution Initiative Measure #65 Sections 5(1) and (2)

Rule 5.4.4 Utilizing the same process outlined in Rule 5.5.1, Caregivers may apply for renewal of their Patient Identification Card no later than one (1) year from the date of issuance or last renewal of the Caregiver Identification Card.

SOURCE: Mississippi Constitution Initiative Measure #65 Sections 5(1) and (2)

Rule 5.4.5 Caregiver Identification Cards may be suspended or revoked for the following:

- a. The caregiver provided false information to the Department;
- b. The caregiver uses his/her card to obtain marijuana for an individual who has not designated them as their caregiver or who is not a qualified patient; and/or.
- c. The caregiver uses the medical marijuana of the patient for whom he/she is providing care.

SOURCE: Mississippi Constitution Initiative Measure #65 Sections 5(1) and (2)

Subchapter 5 Application to Participate in the Medical Marijuana Program as a Caregiver

- Rule 5.5.1 To obtain a Caregiver Identification Card, an applicant must submit (in a form and manner determined by the Department) the following information:
 - a. Full legal name and any aliases, such as a nickname (e.g., Bill as a nickname for William);
 - b. Date of birth;
 - c. Current physical address;
 - d. Current telephone number and/or email address;
 - e. Identification issued by the State of MS driver's license, state-issued ID;
 - f. Current photograph
 - i. clear, color photograph of the head and top of shoulders;

- ii. be an image in a .jpg, .png, or .gif digital image format no larger than 3 mb in size;
- iii. be taken in the last sixty days to reflect the applicant's appearance;
- iv. be taken in front of a plain white or off-white background;
- v. be taken in full-face view directly facing the camera at eye level with nothing obscuring the face;
- vi. must not be digitally enhanced to change the appearance of the applicant (e.g. use of "filters").
- g. Names, dates of birth, and identification numbers (if available at the time of application) of the patients they will be providing services to:
- h. Identification card fee (See Rules 5.1.5 and 5.1.6);
- i. Fingerprints on a fingerprint card or a live scan print to be submitted to conduct a state and federal criminal records checks;
- j. Authorization to conduct state and federal criminal records checks;
- j. An attestation that the information provided is true and correct;
- k. An attestation, signed and dated by the applicant, pledging not to divert medical marijuana or medical marijuana products to any individual or entity; and,
- <u>l. Any other documentation required by the Department such as an acknowledgement of caregiver responsibilities.</u>

Rule 5.5.2 In the event that an applicant is applying to become a caregiver for qualified patient who is a minor and the applicant is not the patient's parent and/or legal guardian, the applicant must also submit authorization from the patient's parent and/or legal guardian to serve in a caregiver capacity. The form of the authorization may be determined by the Department.

SOURCE: Mississippi Constitution Initiative Measure #65 Sections 5(1) and (2)

Subchapter 6 Application to Obtain a Caregiver Institution/Program Identification Card

- Rule 5.6.1 The following entities, licensed by the Department, may facilitate the use of Medical Marijuana by a Qualified Patient after registering with the Department as a Caregiver Institution/Program:
 - a. Hospitals;
 - b. Hospice Programs;
 - c. Assisted Living Programs;
 - d. ICF/IDD Institutions; and,
 - e. <u>Nursing Homes.</u>

- Rule 5.6.2 To register as a Caregiving Institution/Program, the institution/program shall submit, in a form and manner determined by the Department, the following information:
 - a. The name, address, and telephone number of the institution, as well as the contact information for a primary contact person at that institution;
 - b. A copy of the institution's current facility license; and,
 - c. An attestation that the information provided is true and correct and must be signed and dated by an authorized signatory of the institution.

Rule 5.6.3 The Caregiving Institution shall update the Department with any changes to the institution's primary contact person and shall file a copy of their facility licenses each time that license is renewed or updated.

SOURCE: Mississippi Constitution Initiative Measure #65 Sections 5(1) and (2)

Rule 5.6.4 A Caregiving Institution/Program identification card shall remain valid unless or until the institution's/program's state license or certification (whichever is applicable) is no longer valid or the registration is suspended, revoked, or restricted by the Department.

SOURCE: Mississippi Constitution Initiative Measure #65 Sections 5(1) and (2)

Rule 5.6.5 The Department shall provide identification cards to Caregiving

Institutions/Programs to distribute to employees designated by the institution/program to serve as Caregivers for Qualified Patients at the Caregiving Institution.

SOURCE: Mississippi Constitution Initiative Measure #65 Sections 5(1) and (2)

Rule 5.6.6 Caregivers in recognized Caregiver Institutions/Programs are subject to all other Caregiver requirements included in this Part.

SOURCE: Mississippi Constitution Initiative Measure #65 Sections 5(1) and (2)

Subchapter 7 Identification Cards for Owners, Operators, Employees, Contractors, and Agents

Rule 5.7.1 To obtain an Identification Card for an owner, operator, board member, officer, agent, employee, or contractor of a licensed entity participating in the medical marijuana program, the licensed entity must submit (in a form and manner determined by the Department) the following information on behalf of its owners, operators, board members, officers, agents, employees, or contractors:

- a. Full legal name and any aliases, such as a nickname (e.g., Bill as a nickname for William);
- b. Date of birth;
- c. Current physical address;
- d. Current telephone number and/or email address;
- e. Current photograph
 - i. clear, color photograph of the head and top of shoulders;
- ii. be an image in a .jpg, .png, or .gif digital image format no larger than 3 mb in size;
 - iii. be taken in the last sixty days to reflect the applicant's appearance;
 - iv. be taken in front of a plain white or off-white background;
- v. be taken in full-face view directly facing the camera at eye level with nothing obscuring the face;
- vi. must not be digitally enhanced to change the appearance of the applicant (e.g. use of "filters");
- f. Role with the licensed entity;
- g. Date of hire with the licensed entity (if an employee, officer, or agent);
- h. Effective contract date (if a contractor, officer, or operator); and,
- i. Dated evidence of ownership.

Rule 5.7.2 All owners, operators, board members, officers, agents, employees, and contractors are subject to the requirements in 15 Miss. Admin. Code. Chapter 22, Subpart 7.

Subchapter 8 Physician Certification

Rule 5.8.1 A physician certification (in a manner set for the by the Department) is required for a person to apply to become a qualified patient of the medical marijuana program.

SOURCE: Mississippi Constitution Initiative Measure #65 Sections 5(1) and (2)

Rule 5.8.2 The purpose of the physician certification is to determine and certify that a person suffers from a debilitating medical condition for which the use of medical marijuana may mitigate the symptoms and/or effects.

SOURCE: Mississippi Constitution Initiative Measure #65 Sections 5(1) and (2)

- Rule 5.8.3 Before issuing a Physician Certification for an individual, a Physician must:
 - a. Examine the individual in person in Mississippi; and
 - b. Determine that the individual suffers from a Debilitating Medical Condition for which the use of Medical Marijuana may mitigate the symptoms and/or the effects.

Rule 5.8.4 A physician certification is valid for twelve months from the date of issue unless a shorter timeframe is specified by the certifying physician.

SOURCE: Mississippi Constitution Initiative Measure #65 Sections 5(1) and (2)

Subchapter 9 Physician Registration

Rule 5.9.1 Physicians participating in the medical marijuana program with the intent of issuing physician certifications must register with the Department in order to issue physician certifications for the medical marijuana program.

SOURCE: Mississippi Constitution Initiative Measure #65 Sections 5(1) and (2)

Rule 5.9.2 The initial and renewal fees for the physician registration is \$50.00. Fees are nonrefundable. Fees must be paid in the manner set forth by the Department.

SOURCE: Mississippi Constitution Initiative Measure #65 Sections 5(1) and (2)

Rule 5.9.3 In order to register with the Department, the physician (i.e., applicant) must submit the following information in a manner set by the Department:

- a. <u>Evidence of unrestricted licensure in Mississippi by the Mississippi State</u> Board of Medical Licensure;
- b. Issue date and expiration date of licensure in Mississippi;
- c. Area of specialty;
- d. Physical address of practice;
- e. Current telephone number and email address;
- f. Fee of \$50.00;
- g. Evidence of completion of continuing medical education approved by the Department;
- h. A waiver, signed and dated by the physician, allowing, and authorizing the Department to fully communicate with the Mississippi State Board of Medical Licensure and receive licensure information; and,
- i. If applicable, a disclosure that the applicant has a direct or indirect familial or financial relationship with or interest in a licensed entity participating in the medical marijuana program.

SOURCE: Mississippi Constitution Initiative Measure #65 Sections 5(1) and (2)

Rule 5.9.4 Physician Registration may be suspended or revoked for the following:

- a. The physician provided false information to the Department; and/or
- b. The physician is the subject of disciplinary action from the Mississippi Board of Medical Licensure.

Subchapter 10 Requirements of Physicians Participating in the Medical Marijuana Program

Rule 5.10.1 Physicians must complete four (4) hours of initial training related to the use of medical marijuana prior to offering physician certification. Annual training in the amount of two (2) hours related to the use of medical marijuana must also be completed in order to renew participation in the medical marijuana program. All training must be approved by the Department.

SOURCE: Mississippi Constitution Initiative Measure #65 Sections 5(1) and (2)

Rule 5.10.2 Participation in the program does not negate the authority of the Mississippi State

Board of Medical Licensure to investigate physicians and freely communicate with the Department should those instances occur.

SOURCE: Mississippi Constitution Initiative Measure #65 Sections 5(1) and (2)

Rule 5.10.3 Physicians must utilize the Prescription Monitoring Program in order to complete an assessment of the patient prior to issuing a physician certification for the medical marijuana program.

SOURCE: Mississippi Constitution Initiative Measure #65 Sections 5(1) and (2)

Rule 5.10.4 If a physician has a direct or indirect familial or financial relationship with or interest in a licensed entity participating in the medical marijuana program, he/she must disclose that information to all patients of the medical marijuana program. Evidence of this disclosure must be maintained in the patient's medical record.

SOURCE: Mississippi Constitution Initiative Measure #65 Sections 5(1) and (2)

Rule 5.10.5 All patients must be advised of their freedom of choice as to the medical marijuana treatment center/dispensary they wish to utilize. Evidence of this must be maintained in the patient's medical record.

SOURCE: Mississippi Constitution Initiative Measure #65 Sections 5(1) and (2)

Rule 5.10.6 In addition to the requirements set forth in this Part, physicians must also follow the rules, regulations, and policies set forth by the Mississippi State Board of Medical Licensure. This includes, but is not limited to, Part 2640: Chapter 1: Rules Pertaining to Prescribing, Administering and Dispensing of Medication.

SOURCE: Mississippi Constitution Initiative Measure #65 Sections 5(1) and (2)

Rule 5.10.7 A certifying physician may determine that a patient no longer meets the requirements related to a debilitating medical condition; no longer believes that the patient receives therapeutic benefit from the use of medical marijuana; or does not believe the patient is using the medical marijuana for medical purposes. The

physician may notify the Department of that determination and intent to terminate the physician certification. Termination of physician certification renders the patient identification card null and void.