

9810.4003 MEDICAL CANNABIS PATIENT REGISTRY; HEALTH CARE PRACTITIONER QUALIFICATIONS AND DUTIES.

Subpart 1. **Health care practitioner qualifications.** Except for patients who are veterans, the office may accept electronic certifications of a patient's qualifying medical condition for the therapeutic use of medical cannabis only from health care practitioners who hold an active license in good standing under Minnesota Statutes, chapter 147, for physicians; Minnesota Statutes, chapter 147A, for physician assistants; or Minnesota Statutes, sections 148.171 to 148.285, for advanced practice registered nurses.

Subp. 2. **Health care practitioner requirements.** Before issuing an electronic certification of a patient's qualifying medical condition, a health care practitioner must:

- A. have a medical relationship between the health care practitioner and patient;
- B. assess the patient's medical and family history and current medical condition, including:
 - (1) examine the patient and medical and family history to confirm the diagnosis of the qualifying medical condition. A health care practitioner may conduct the examination remotely by secure videoconference, telephone, or other remote means; and
 - (2) communicate with subspecialists also treating the patient;
- C. determine, in the health care practitioner's medical judgment, whether a patient has a qualifying medical condition and, if so determined, provide the patient with certification of the diagnosis;
- D. advise patients, registered designated caregivers, and parents, legal guardians, and spouses acting as caregivers of any nonprofit patient support groups or organizations;
- E. provide to patients explanatory information from the office, including information about the therapeutic use of cannabis and the possible risks, benefits, and side effects of the proposed treatment;
- F. advise patients on potential drug interactions with current medications; and
- G. advise patients on the potential risks of cannabis use related to the patient's medical condition and history.

Subp. 3. **Health care practitioner duties.** When a health care practitioner receives notice from the office that a patient has been enrolled in the registry program, the health care practitioner must:

- A. participate in the patient registry reporting system for each patient for whom the practitioner has written a certification of a qualifying medical condition. A health care practitioner must transmit patient data as required by Minnesota Statutes, section 342.55, subdivision 4;
- B. be available to provide continuing treatment of the patient's qualifying medical condition;

C. maintain and report health records under subpart 6 for all patients for whom the practitioner has issued a written certification of a qualifying medical condition;

D. make a copy of the records that support the certification of the qualifying medical condition available to the office and otherwise provide information to the office upon request about the patient's qualifying medical condition, course of treatment, and patient outcomes in compliance with this chapter and Minnesota Statutes, chapter 342;

E. every three years, if the patient wishes to continue the patient's enrollment in the registry, assess whether the patient continues to have the qualifying medical condition and, if so, issue the patient a new certificate of that diagnosis; and

F. notify the office in writing in a manner prescribed by the office within 14 calendar days after learning of the death of a patient whose qualifying medical condition was certified by the health care practitioner.

Subp. 4. Certification of a qualifying medical condition. A certifying health care practitioner must complete an electronic certification of a patient's qualifying medical condition on a form provided by the office. The written certification of a patient's qualifying medical condition must:

A. acknowledge that the patient is under the health care practitioner's care, either for the patient's primary care or for the qualifying medical condition;

B. confirm the patient's diagnosis of the qualifying medical condition;

C. contain an affirmation that the health care practitioner has:

(1) established a patient-provider relationship;

(2) conducted an examination appropriate to confirm the diagnosis;

(3) reviewed the patient's medical and family history to confirm that the diagnosis is within the health care practitioner's professional standards of practice; and

(4) advised the patient on potential drug interactions and the appropriateness of cannabis use in consideration of the patient's medical and family history;

D. include the date that the health care practitioner completed the certification of the qualifying medical condition; and

E. include any additional information that the office requests to assess the effectiveness of medical cannabis in treating the patient's qualifying medical condition or associated symptoms.

Subp. 5. Health care practitioner prohibitions. A health care practitioner who has issued or intends to issue a written certification of a patient's qualifying medical condition must not:

A. advertise as a retailer or producer of cannabis flower or cannabis products;

B. knowingly refer patients to a cannabis business or to a designated caregiver;

C. issue certifications while holding a financial interest in a cannabis business;

D. issue a written certification for the health care practitioner's participation in the registry program;

E. directly or indirectly accept, solicit, or receive anything of value from a licensed cannabis business, a licensed hemp business, an employee of a licensed cannabis or hemp business, a manufacturer, or any other person associated with a licensed cannabis or hemp business;

F. offer a discount or any other item of value to a patient who uses or agrees to use a particular registered designated caregiver, licensed cannabis business or hemp business, or medical cannabis flower or medical cannabinoid products;

G. directly or indirectly benefit from a patient obtaining a written certification for the qualifying medical condition, except that a health care practitioner may charge an appropriate fee for the patient visit;

H. hold a financial or management interest in an enterprise that produces, sells, or provides cannabis flower or cannabis products to customers or patients; or

I. perform examinations for the certification of qualifying medical conditions or complete certifications of qualifying medical conditions at the location of any cannabis business.

Subp. 6. Records maintained by the health care practitioner. A health care practitioner must maintain a health record for each patient for whom the health care practitioner has certified the qualifying medical condition for at least three years after the last patient visit, or for seven years, whichever is greater. The records need not be maintained separately from the health care practitioner's established records for the ongoing medical relationship with the patient. The records must be legible, accurately reflect the patient's evaluation and treatment, and include:

A. the patient's name and dates of visits and treatments;

B. the patient's case history as it relates to the qualifying medical condition;

C. the patient's health condition as determined by the health care practitioner's examination and assessment;

D. the results of all diagnostic tests and examinations as the results relate to the qualifying medical condition and any diagnosis resulting from the examination;

E. the patient's plan of care, which must state with specificity the patient's condition, functional level, treatment objectives, medical orders, plans for continuing care, and any modifications to that plan; and

F. a list of drugs prescribed, administered, and dispensed and the quantity of the drugs.

Subp. 7. Health care facilities; return of items. If a patient is discharged, transferred, or dies, a health care facility must return all of the patient's medical cannabis flower or medical cannabinoid products to the patient or another person authorized to possess medical cannabis flower or medical cannabinoid products. If the health care facility is unable to return the remaining medical cannabis flower or medical cannabinoid products to the patient or another authorized person, the facility

must destroy the medical cannabis flower or medical cannabinoid products in a manner consistent with part 9810.4001, subpart 9.

Statutory Authority: *MS s 342.02*

History: *49 SR 1143*

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