

Missouri Medical Marijuana Program – Industry Portal User Guide



Overview

NIC Licensing Solutions (NLS) is the official web portal for the Missouri Medical Marijuana Program (MMMP). Industry stakeholders can utilize NLS to manage the application process for physician, patient, caregiver, agent, and business license applications. NLS allows users to update their previously submitted and approved applications as well as renew expiring licenses.

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Register

New users must first register by navigating to the Registration page:

The screenshot shows the registration page for the Missouri Medical Marijuana Program Portal. At the top left is the State of Missouri Department of Health & Senior Services logo. At the top right are links for 'Sign In' and 'Register'. The main heading is 'Register for the Missouri Medical Marijuana Program Portal'. Below this is a yellow warning box: 'WARNING: Please be sure that the information provided during registration is 100% accurate. This data will be used in your application, and you CANNOT modify this information after you register.' The form fields include: 'Legal First Name *' and 'Legal Last Name *' (both empty); 'Email *' with the value 'cathy.parks@egov.com' and 'Confirm Email *' (empty); 'Phone Number *' (empty); 'What type of application would you like to get started with? *' (dropdown menu); 'Password *' (masked with dots) and 'Re-enter Password *' (masked with dots); a checkbox for 'Please read and accept Terms and Conditions before proceeding.'; a CAPTCHA box with 'I'm not a robot' and a 'REGISTER' button. Below the button is a link: 'If you didn't receive your verification email, please click here.' The footer contains '© 2019 State of Missouri | Accessibility' on the left and 'Powered by Complia | MMMP | v.4.147.0' on the right.

Once the registration information is submitted, confirm your email address by clicking the link sent to your inbox. **You will not be able to log in until you verify your email address.**

Log In

Once your new account email has been verified, you can log in:

STATE OF MISSOURI
DEPARTMENT OF HEALTH & SENIOR SERVICES

Sign In Register

Missouri Medical Marijuana Portal - Sign In

Username (email) *

Username

Password *

Password

☒ Accept [Terms and Conditions](#).

☐ I'm not a robot

reCAPTCHA
Privacy - Terms

SIGN IN FORGOT PASSWORD

© 2019 State of Missouri | Accessibility

Powered by Complia | MMMP | v.4.147.0

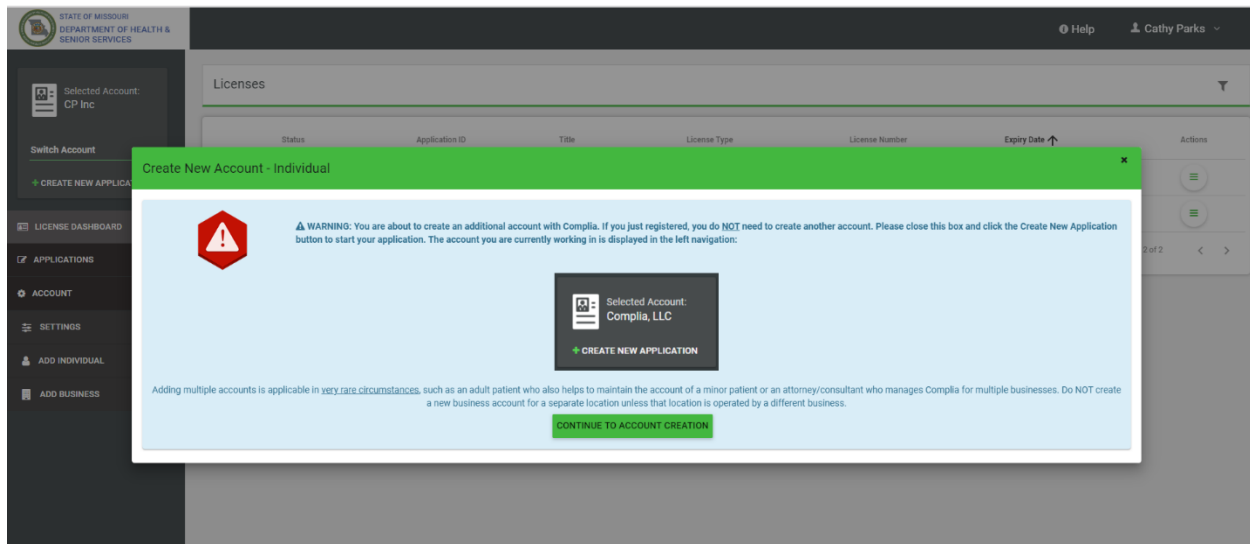
If you forget your password, click the Forgot Password button, provide your email address, and follow the instructions.

Managing Multiple Accounts

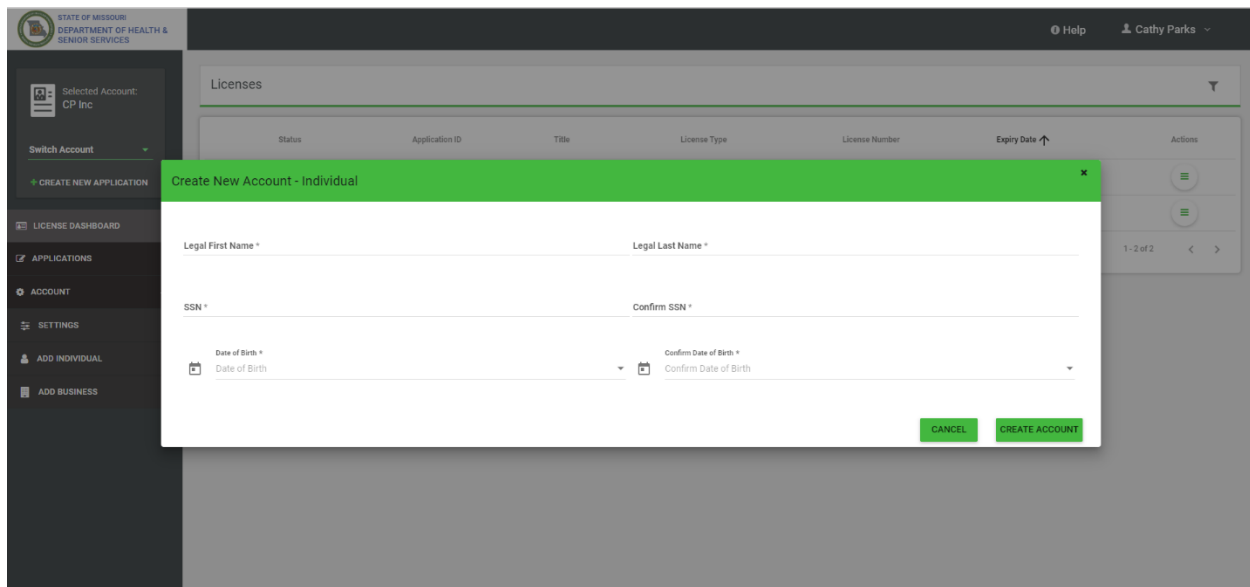
In order to keep your applications organized, separate accounts are required to submit applications for a specific individual or business. For example, if you want to apply for your patient license and a business license, you will be required to maintain those applications in two separate accounts: one for you and one for the business.

Adding multiple accounts is applicable in *very rare circumstances*, such as an adult patient who also helps to maintain the account of a minor patient or an attorney/consultant who manages NLS (MMMP Licensing System) for multiple businesses. Do **NOT** create a new business account for a separate location unless that location is operated by a different business.

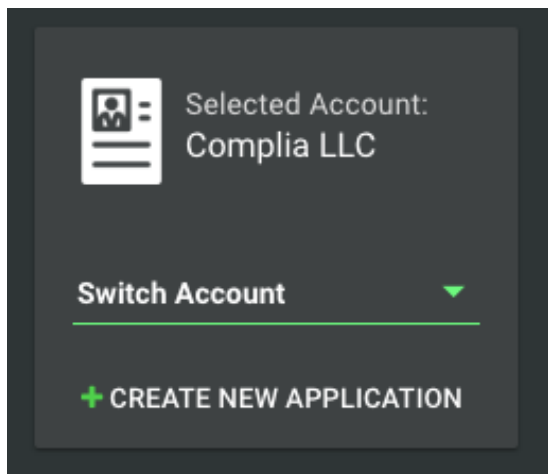
To add a new account, expand the Account tab and select Add Individual or Add Business:



Next, click Continue to Account Creation:



The box in the upper left corner of the screen allows you to easily switch between accounts



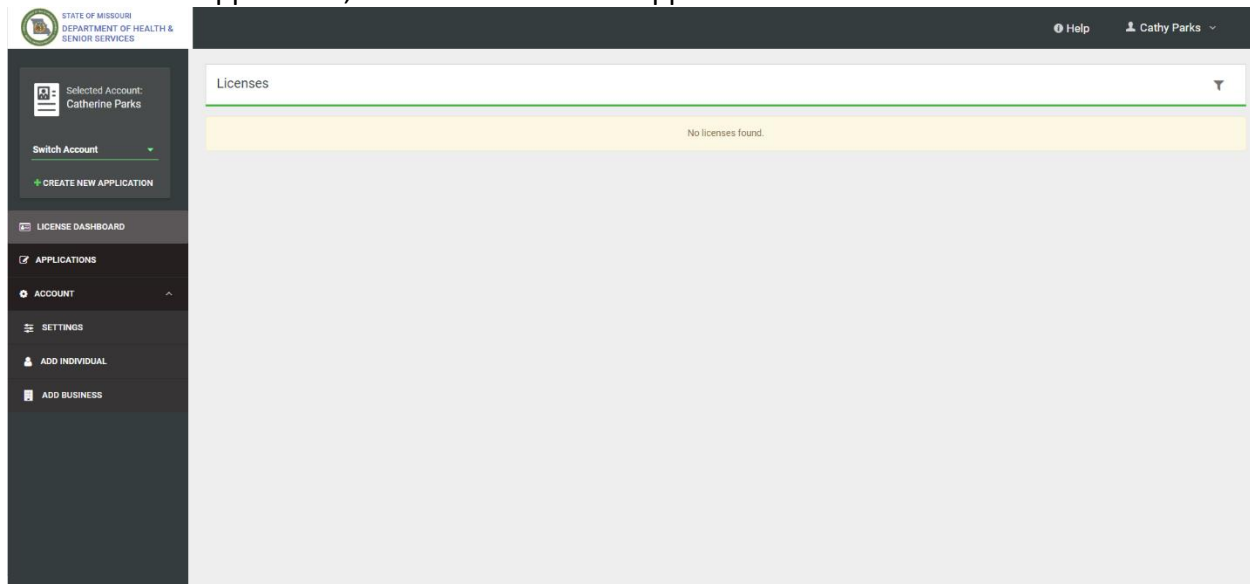
To switch between accounts, click the drop down and select the desired account.

Payment

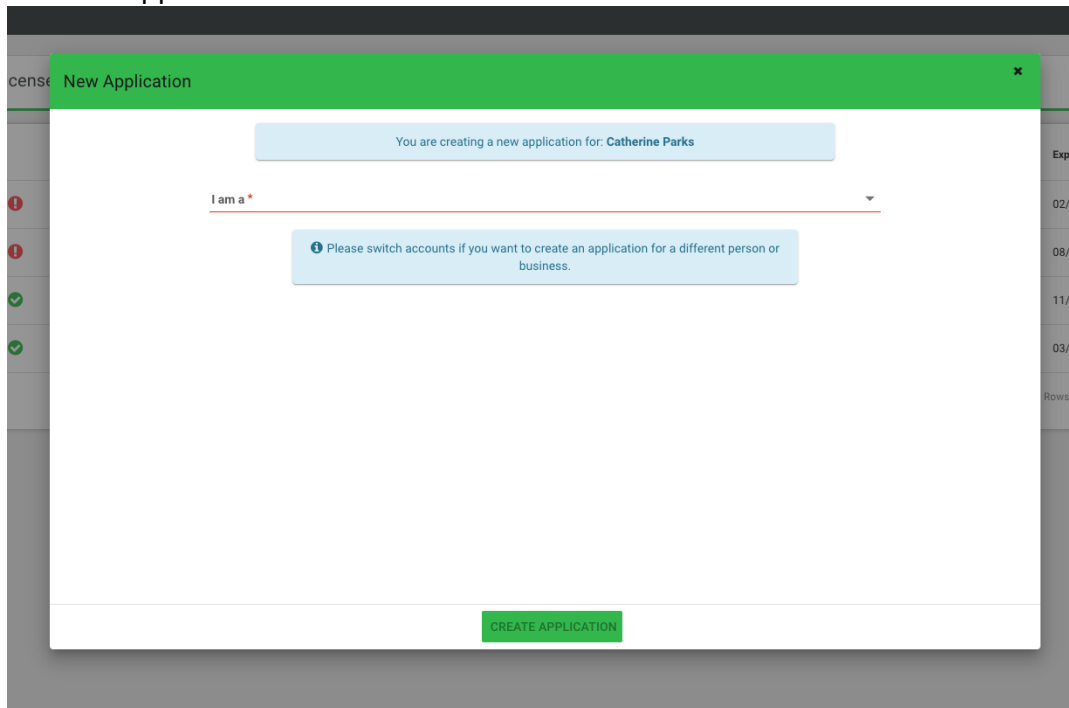
Most applications in NLS require the payment of fees as detailed by the MMMP rules and regulations. Users will be redirected to the State of Missouri's Third-Party Payer system after submitting each application. Please contact the State of Missouri's Third-Party Payer system directly for payment related questions.

Submit a New Application

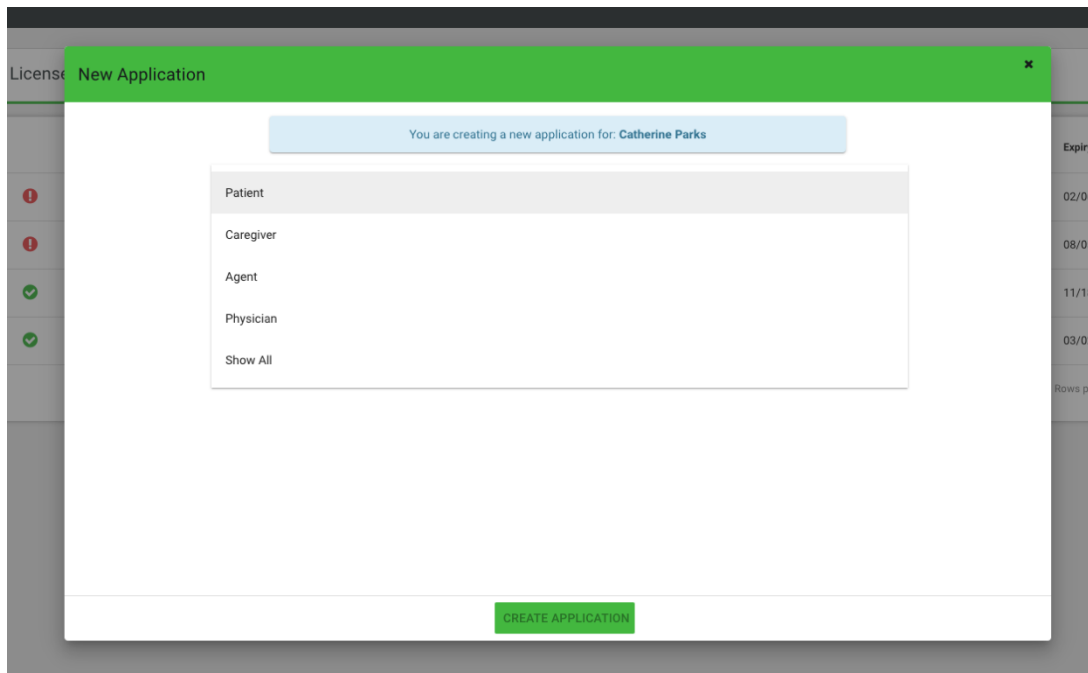
To start a new application, click the Create New Application button in the center of the screen:



Next, choose the application type you'd like to create. Be sure to verify that you are working in the proper account by verifying the information in the blue box. Click Create Application to start the application.



Answer the question, “I am a _____” to select the category of application you want to submit:



If you select “Show All,” the screen will display:

The screenshot displays the 'New Application' interface. At the top, a green banner reads 'New Application'. Below it, a message states 'You are creating a new application for: Nancy Hahlbeck'. A dropdown menu labeled 'I am a *' is set to 'Show All'. The main area contains eleven application type buttons, each with a document icon: 'New Patient Registration', 'New Caregiver Registration', 'Patient Update', 'Caregiver Update', 'New Agent Registration', 'Patient Renewal', 'Caregiver Renewal', 'Agent Update', 'Agent Renewal', 'Physician Registration', and 'Electronic Physician Certification'. A green 'CREATE APPLICATION' button is at the bottom center. The background interface includes a sidebar with 'License' and a table with 'Expiry Date' and 'Actions' columns.

****Note – Electronic Physician Certification may only be submitted by a licensed Physician.**

Once the application is created, please fill in all of the required information. Each application contains required data fields, question responses, and document uploads:

The screenshot shows a row of application tabs. The first tab, 'GENERAL INFORMATION', is highlighted in green and contains the text 'Applications / New Patient Application'. The other tabs are 'CONTACT INFORMATION', 'PHYSICIAN / CONDITION INFORMATION', 'QUESTIONS', 'DOCUMENTS', 'PAYMENT', and 'REVIEW'.

You are welcome to save the application and return to it at a later time if you need more time. Simply click save and log off.

As your application is nearing completion, navigate to the Review tab to verify all required items are completed. If you see any red X's, you'll need to go back to the applicable tab to complete the missing items.

Once your application is submitted, it will be available for review by the MMMP. Please be sure to monitor your inbox for updates as your application is reviewed. If the MMMP finds any potential issues with your application, it may be rejected. You will receive an email notification when this occurs. Rejected applications must be corrected and resubmitted through NLS.

To proceed with an Electronic Physician Certification, follow the steps below;

First select the Electronic Physician Certification Application option:

The screenshot shows a 'New Application' modal window. At the top, it says 'You are creating a new application for: Nancy Hahlbeck'. Below this, there is a dropdown menu labeled 'I am a *' with 'Physician' selected. Two buttons are visible: 'Physician Registration' and 'Electronic Physician Certification'. A blue information box states: 'Please switch accounts if you want to create an application for a different person or business.' At the bottom right of the modal is a green 'CREATE APPLICATION' button. The background shows a table with columns 'Expiry Date' and 'Actions', containing three rows of dates and menu icons.

You will need to choose your registration number from the drop down and click save:

The screenshot shows the 'Electronic Physician Certification' application form. The top navigation bar includes 'Applications / Electronic Physician Certification'. Below this is a tabbed interface with 'PHYSICIAN REGISTRATION NUMBER' selected. A blue information box states: 'This form must be completed by a certifying physician that has an approved physician registration on file within their account. If you are a certifying physician, and you do not have an approved physician registration within your account, please complete and submit a physician registration application.' Below this is a dropdown menu labeled 'Registration Number *' with 'PHY000021' selected. At the bottom are two green buttons: 'SAVE' and 'CANCEL'.

You will need to complete the Patient information:

Applications / Electronic Physician Certification

PHYSICIAN REGISTRATION NUMBER

GENERAL INFORMATION

PHYSICIAN INFORMATION

ATTESTATIONS

REVIEW

Patient First Name *

Patient Middle Name

Patient Last Name *

Patient Date of Birth *

Patient Date of Birth

This field is required.

Patient's email address *

Patient Social Security Number *

Is the Patient 18 years or older? *

☐ Yes
☐ No

Date of Patient Examination *

Date of Patient Examination

This field is required.

Qualifying Condition

Recommended Amount (30 Day Period)

Qualifying Medical Condition *

SAVE

SAVE & NEXT

CANCEL

On the next tab you will confirm your Physician information.

Applications / Electronic Physician Certification

PHYSICIAN REGISTRATION NUMBER

GENERAL INFORMATION

PHYSICIAN INFORMATION

ATTESTATIONS

REVIEW

Physician First Name *

Nancy

Physician Last Name *

Physician

Physician License Number *

PHY000016

Physician License Type *

M.D.

Physician Phone *

(816)783-3662

Physician Email *

nancy.hahlbeck@egov.com

Physician Office Address

Street *

123 SE 3RD ST

Unit No. / Apt No.

City *

LEES SUMMIT

State *

Missouri

Zip Code *

64063

Address Verified? *

☒ Yes

VERIFY ADDRESS

SAVE

SAVE & NEXT

CANCEL

Next, you will need to agree to each of the questions asked. If you disagree with any of these statements, then you will not be able to proceed with the application.

Applications / Electronic Physician Certification

PHYSICIAN REGISTRATION NUMBER	GENERAL INFORMATION	PHYSICIAN INFORMATION	ATTESTATIONS	REVIEW
<p>I, the physician, in the case of a non-emancipated qualifying patient under the age of eighteen (18), have received the written consent of a custodial parent or legal guardian who serve as a primary caregiver for the qualifying patient. *</p> <p><input type="radio"/> I Agree</p> <p><input type="radio"/> I Disagree</p> <p>I, the physician, have met with and examined the qualifying patient. *</p> <p><input type="radio"/> I Agree</p> <p><input type="radio"/> I Disagree</p> <p>I, the physician, have reviewed the qualifying patient's medical records or medical history and the qualifying patient's current medications and allergies to medications. *</p> <p><input type="radio"/> I Agree</p> <p><input type="radio"/> I Disagree</p> <p>I, the physician, have discussed with the qualifying patient, or the qualifying patient's custodial parent or legal guardian, the patient's current symptoms. *</p> <p><input type="radio"/> I Agree</p> <p><input type="radio"/> I Disagree</p> <p>I, the physician, have created a medical record of the qualifying patient regarding the meeting and am maintaining the qualifying patient's medical record as required in 334.097, RSMo. *</p> <p><input type="radio"/> I Agree</p> <p><input type="radio"/> I Disagree</p>				










You will be able to submit application after this step.

Updating your Records

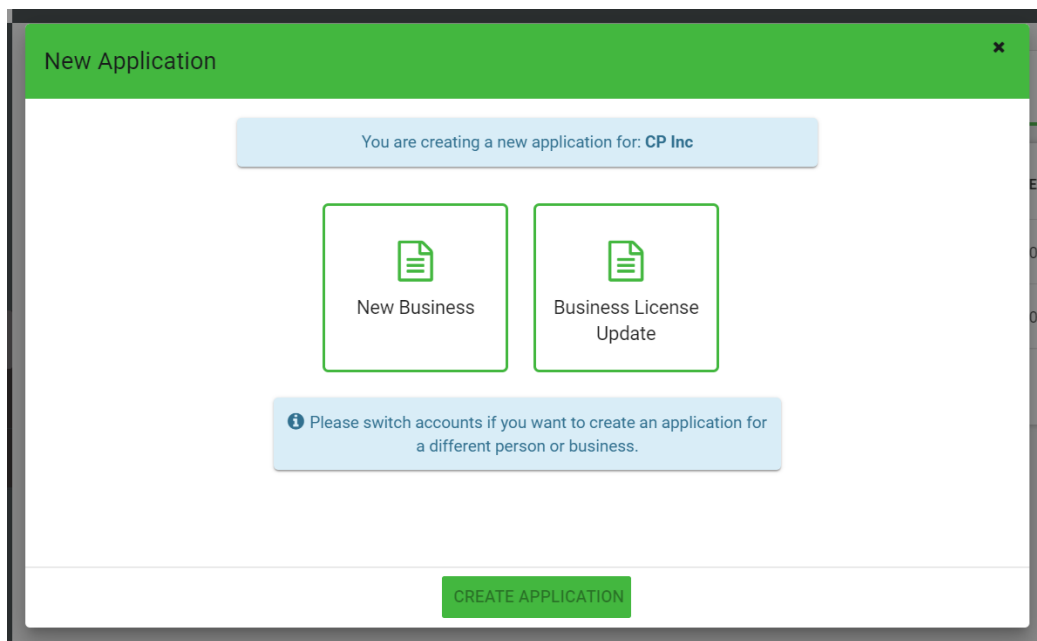
Complia allows users to update their previously submitted and approved applications NLS allows users to update their previously submitted and approved applications.

To update a patient, caregiver, or agent license, select the appropriate “Update” application:

New Application


 New Patient Registration	 New Caregiver Registration	 Patient Update	 Caregiver Update
 New Agent Registration	 Patient Renewal	 Caregiver Renewal	 Agent Update
 Agent Renewal <input type="button" value="CREATE APPLICATION"/>			

To update a business license, select “Business License Update”:




New Application

You are creating a new application for: CP Inc



New Business



Business License Update

Please switch accounts if you want to create an application for a different person or business.

CREATE APPLICATION

You may start an update application by clicking on the “actions” icon next to your previously approved application.

Licenses

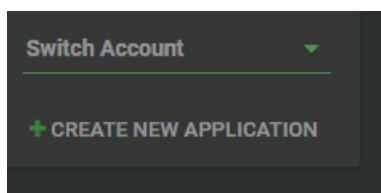
Status	Application ID	Title	License Type	License Number	Expiry Date ↑	Actions
✓ Approved	1088	CP LLC	New Business	TES000001	07/17/2020	⋮

Licenses

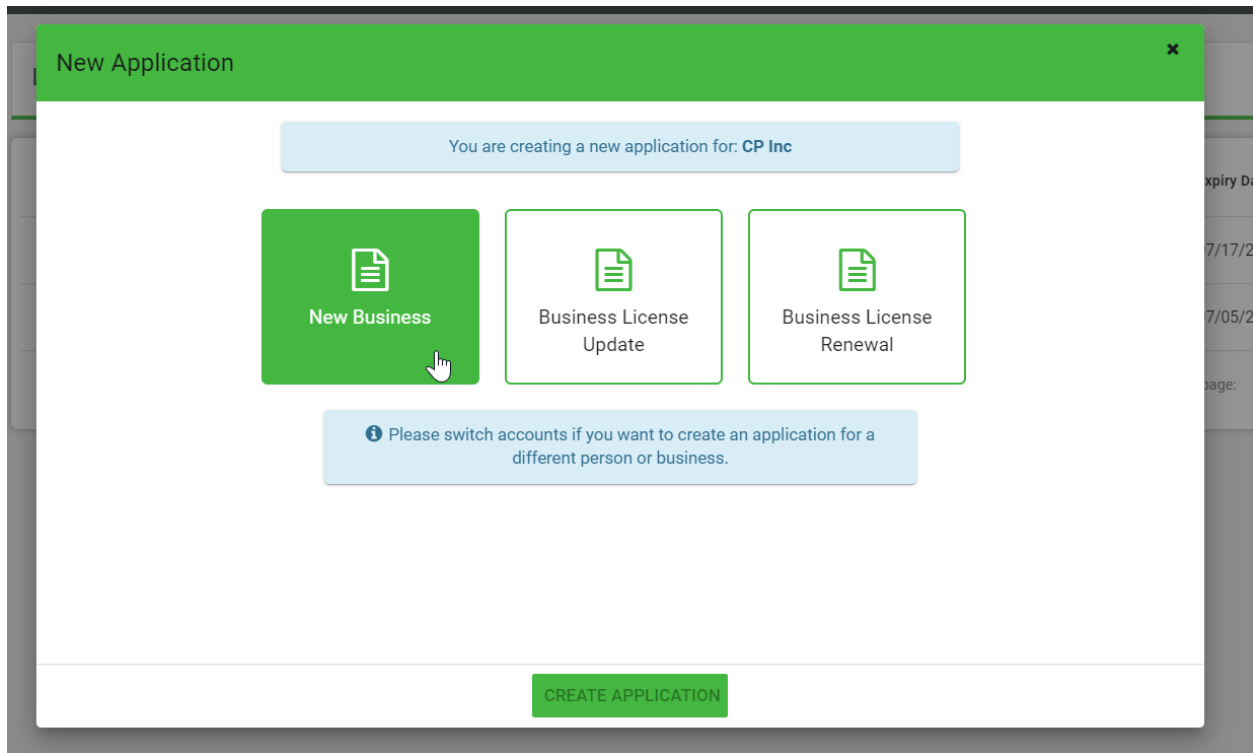
Status	Application ID	Title	License Type	License Number	Expiry Date ↑	Actions
✓ Approved	1088	CP LLC	New Business	TES000001	07/17/2020	<ul style="list-style-type: none"> View License Download License Business License Update
⊘ Deactivated	1089	CPMP LLC	New Business	TES000002	07/17/2020	

Page: 1 Rows per page: 10

Or you can start by clicking the “+Create New Application” icon on the left-hand navigation bar.



Then select the Business License Update:



The first tab on your update application is a set of qualifying questions. Once you save your selections on this tab, the associated information required will display on the subsequent tabs. Once you save your selections, you may not change them. If you need to start the application over, simply delete this application from your dashboard and begin again.

The License Information Tab will display a list of qualifying questions:

Help
Cathy Parks

Applications / Business License Update

LICENSE INFORMATION

GENERAL INFORMATION

PERSONS OF INTEREST

LOCATION INFORMATION

PRIMARY CONTACT

QUESTIONS

DOCUMENTS

PAYMENT

REVIEW

Please select the applicable license number from the drop down. Please note: If your license has been deactivated or is expired, it may not appear in the drop down.

License Number*
TES000001

Please describe the nature of this update.

0 / 500

Do you wish to remit an annual payment?
☐ No

Does this update application assign, sell, lease, sublicense, or otherwise transfer its license to any other entity and/or make changes to ten percent (10%) or more of the ownership interests of the facility?
☒ Yes
☐ No

Does this update application involve a material deviation from the proposed or current physical design of the facility?
☒ Yes
☐ No

Does this update application involve a change in the facility's location?
☒ Yes
☐ No

Does this update application involve combining licensed facilities under the same ownership at a single location?
☒ Yes
☐ No

Does this update application involve combining licensed facilities between two (2) or more entities with different ownership at a single location?
☒ Yes
☐ No

Does this update application involve the construction of a warehouse sited at a location other than the approved location of the facility?
☒ Yes
☐ No

Was your annual fee submitted outside of the online registry system?
☐ Yes
☒ No

SAVE

CANCEL

Continue through the tabs to complete your updated information. Make sure your information is correct before submitting the application.

Applications / Business License Update

LICENSE INFORMATION

GENERAL INFORMATION

PERSONS OF INTEREST

LOCATION INFORMATION

PRIMARY CONTACT

QUESTIONS

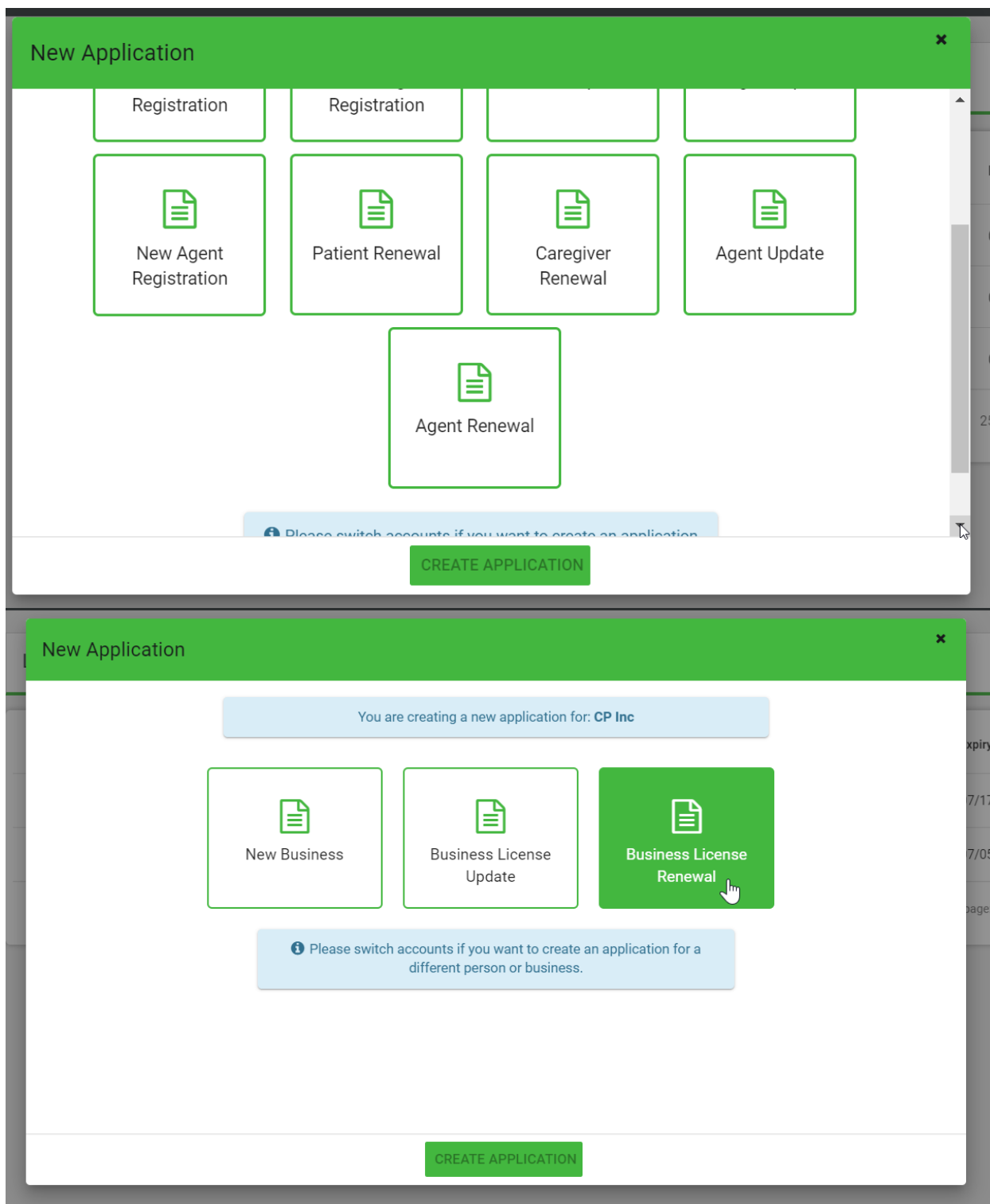
DOCUMENTS

PAYMENT

REVIEW

Renewals

Patient, Caregiver, Agent, and Business licenses may be renewed by selecting corresponding option:



Or you can renew by accessing your application via the License Dashboard, by clicking on the green lines of the “actions” icon :



Selected Account:
Catherine Parks

Switch Account

+ CREATE NEW APPLICATION

LICENSE DASHBOARD

APPLICATIONS

ACCOUNT

Licenses

Status	Application ID	Title	License Type	License Number	Expiry Date ↑	Actions
Approved	1280	tua tua	New Patient Registration	PAT000081	02/05/2021	

Page: 1
Rows per page: 25
1 - 1 of 1

STATE OF MISSOURI
DEPARTMENT OF HEALTH &
SENIOR SERVICES

Selected Account:
Catherine Parks

Account

+ CREATE NEW APPLICATION

LICENSE DASHBOARD

APPLICATIONS

ACCOUNT

Help
Cathy Parks

Licenses

Status	Application ID	Title	License Type	License Number	Expiry Date ↑	Actions
Approved	1280	tua tua	New Patient Registration	PAT000081	02/05/2021	<div> View License Download License Patient Update Patient Renewal </div>

Page: 1
Rows per page: 25

For Renewal Applications - you will begin with your License Number which will be from the drop down here:

Selected Account:
Catherine Parks

Switch Account

+ CREATE NEW APPLICATION

LICENSE DASHBOARD

APPLICATIONS

ACCOUNT

Applications / Patient Renewal Application

LICENSE INFORMATION

GENERAL INFORMATION

CONTACT INFORMATION

PHYSICIAN / CONDITION INFORMATION

QUESTIONS

DOCUMENTS

PAYMENT

REVIEW

Badge Number *
PAT000081

SAVE

CANCEL

Note the prepopulated information appears here:

NIC - Missouri Industry Portal User Guide, March 2021

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STATE OF MISSOURI
DEPARTMENT OF HEALTH & SENIOR SERVICES

Help Cathy Parks

Applications / Patient Renewal Application

LICENSE INFORMATION GENERAL INFORMATION CONTACT INFORMATION PHYSICIAN / CONDITION INFORMATION QUESTIONS DOCUMENTS PAYMENT REVIEW

Legal First Name *
tua

Middle Name

Legal Last Name *
tua

Date of Birth *
03/28/1967

State of Missouri ID/ID Number
Missouri

Social Security Number *
667-89-8976

Email *
cathy.parks@egov.com

Phone *
(654)322-1113

Is the Patient 18 years or older? *

☒ Yes
☐ No

SAVE SAVE & NEXT CANCEL

Review your application carefully to ensure the information on file is accurate.

Support

For questions regarding application requirements, acceptable documentation, the status of your application, payments, rules, regulations, policy, or other program specific questions, please contact the MMMP directly at (866) 219-0165 or (573) 751-6580 or via email at medicalmarijuanainfo@health.mo.gov. Visit <https://health.mo.gov/safety/medical-marijuana/index.php> for detailed information surrounding the program including FAQs.

If you have technical support questions and need assistance with logging in, switching accounts, or utilizing the portal properly, please contact nlsupport-mo@egov.com

NLS support is not able to provide status updates on submitted applications. Please do not contact NLS support to ask about the status of your application. Doing so may result in processing delays.

Help information, contact numbers, emails and this user guide are located in the portal. Click on the Help button in upper right of your screen.

No licenses found.

Help



Please click [here to view the training material](#)

Please contact us at medicalmarijuanainfo@health.mo.gov or (573) 751-6580 or (866) 219-0165 for any further assistance. Thank you!



If you do not receive Complia email notifications, please check your spam folder.

CLOSE