

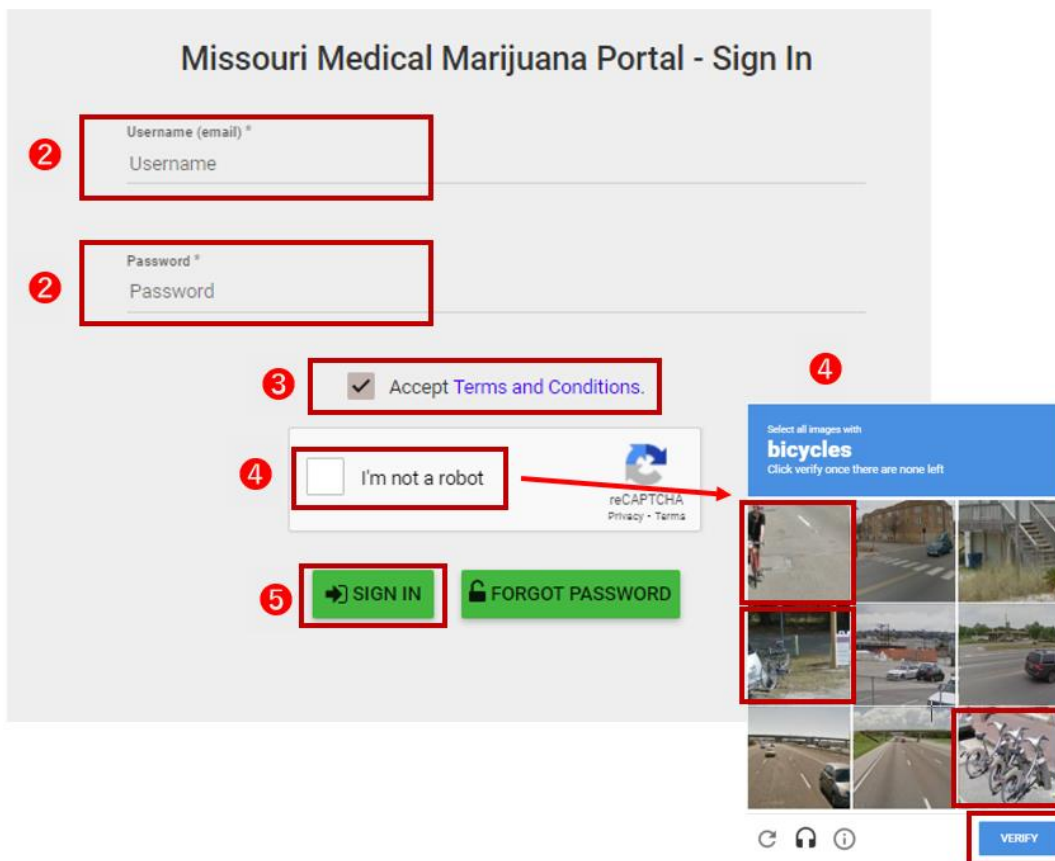
## How to Submit a Patient Electronic Certification Form

**Note:** It is recommended that you use Google Chrome as your internet browser because other browsers may not work properly with the Registry Website.

To begin, patients will need to visit with a certifying MD or DO physician who is in good standing in the state of Missouri and have the **Physician Certification Form** completed by the physician. Next, to complete an application, patients will need to **Register for a Patient/Caregiver account** with the Department. Finally, patients will need to complete and **Submit an Application** for a Missouri Medical Marijuana license.

To submit an **Electronic Physician Certification Form** for a Patient Application:

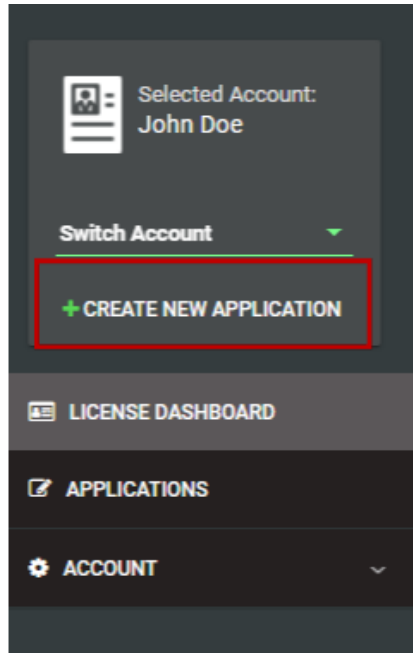
1. Navigate to the Registry website at: <https://mo-public.mycomplia.com>
2. Enter your **Username (email)** and **Password**.
3. Check the **Accept Terms and Conditions** box.
4. Click **I'm not a robot**. If a pop-up window appears, follow the prompts, and click **Verify**.
5. Click **Sign In**.



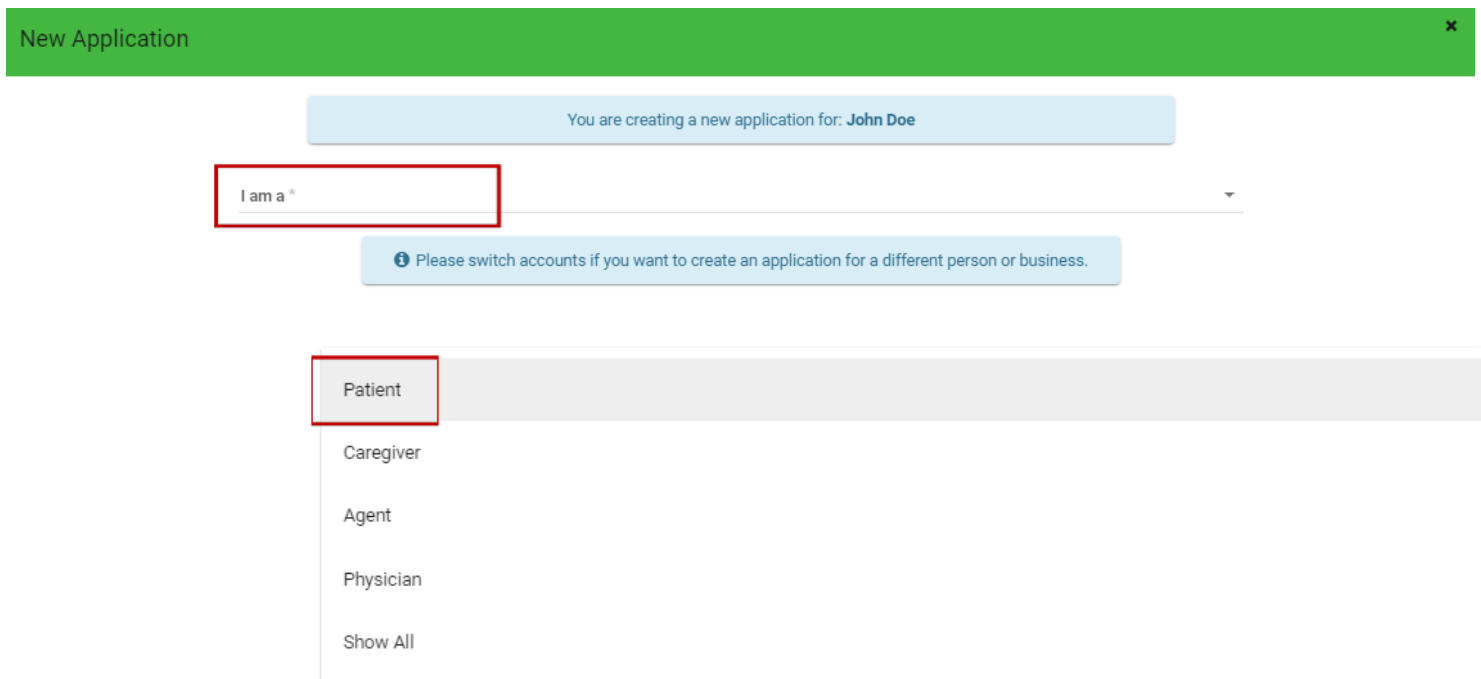
The screenshot shows the "Missouri Medical Marijuana Portal - Sign In" page. The form includes the following elements:

- 2**: Username (email) \* field with "Username" placeholder.
- 2**: Password \* field with "Password" placeholder.
- 3**:  Accept Terms and Conditions.
- 4**:  I'm not a robot (reCAPTCHA) button.
- 4**: reCAPTCHA verification window titled "Select all images with bicycles" with a "VERIFY" button.
- 5**: **SIGN IN** button and **FORGOT PASSWORD** button.

6. Click 'Create New Application'.



7. For the Application Type, click the 'I am a' drop down box, and select 'Patient'.



8. If you are a new patient, select **'New Patient Registration'**. If you are renewing an application, select **'Patient Renewal'**. Click **'Create Application'**.

The screenshot shows a web interface for creating a new application. At the top, a green header bar contains the text "New Application" and a close button. Below this, a light blue box states "You are creating a new application for: John Doe". A dropdown menu labeled "I am a\*" is set to "Patient". Three main options are presented in boxes: "New Patient Registration" (green background, checked), "Patient Update" (white background), and "Patient Renewal" (white background). A blue informational box below these options reads "Please switch accounts if you want to create an application for a different person or business." Two green arrows point from the word "OR" below this box to the "New Patient Registration" and "Patient Renewal" options. At the bottom center, a green "CREATE APPLICATION" button is highlighted with a red border.

Click on the **Physician/Condition Information** Tab:

9. Under **Recommendation Type**, click the drop down, and select **'Electronic Certification'**.

The screenshot shows the "Physician / Condition Information" tab selected in a form. The breadcrumb "Applications / New Patient Application" is visible at the top. Below the tabs, the "Recommendation Type" section is active. A dropdown menu is open, showing "Manual Certification" (selected with a green checkmark) and "Electronic Certification" (highlighted with a red box). A red arrow points from the "Manual Certification" option in the dropdown to the "Electronic Certification" option. The dropdown is titled "Please select the type of physician certification to start with \*".

10. A green box will appear to the right labeled **View Available Certifications**. Click the green box.

Applications / New Patient Application

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

Recommendation Type

Please select the type of physician certification to start with \*

Electronic Certification

**VIEW AVAILABLE CERTIFICATIONS**

Physician Registration Number \* Electronic Certification Selected? \*  No

11. A pop-up will appear listing all available physician certifications that are linked to the applicant's social security number and date of birth. Choose the electronic form and click **'Update'**. The information submitted by the certifying physician will auto-populate into the application.

Physician Certification Selection

Please select the Physician Certification by clicking on respective sections below.

Physician Name: Jim Doe ✓

Recommendation ID: 1711 Examination Date: 04/06/2021

CANCEL **UPDATE**

**Note:** Once the electronic form is selected and appears in the application, applicants need to click **'Save and Next'** to continue completing the application.

Applicants submitting an electronic physician certification form with their patient application are not required to submit an upload of their form. This category on the **Documents** Tab will disappear when an electronic form is attached to an application.

Applications / New Patient Application

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

Digital Photo **UPLOAD NEW**

Proof of Missouri Residency **UPLOAD NEW**

Government Issued Photo Identification Card **UPLOAD NEW**

**SAVE** **SAVE & NEXT** CANCEL

If a tan box appears indicating that **“No Physician Certification found”**, this means that either the physician has not submitted an electronic form, or the information submitted with the electronic form is incorrect.

Physician Certification Selection

No Physician Certification found.

CANCEL

UPDATE

To correct the errors, please contact the physician first to determine if the error is within the electronic form, or within their account, and then contact the Department.

To learn how to complete the rest of the application, please visit the [Application Video Guides](#) tutorial page available on our website.