

Patient Application Instructions:

Non-Minor (19 years and older)

Welcome to the North Dakota Medical Marijuana Program.

Applications will be completed and submitted online via the BioTrackTHC system found [here](#).

General information data fields that must be completed include:

- Applicant name
- Date of birth
 - ✓ Please Note: applicant name and date of birth should match what is on applicant's ND state issued driver's license or ND state issued non-driver identification card.
- Address
- Phone number
- Email address
 - ✓ Please Note: all information must be current to avoid any delay in the application process and receipt of the printed ID card.

In addition, applicants will be required to submit the following:

- An uploaded photo
 - This is the photo that will go on the ID card if the application is approved.
 - Applicant must be facing the camera directly with their full face in view. Do not tilt the photo.
 - Do not use a filter.
 - Eyes must be open.
 - The background of the photo should be plain (plain white or off-white background is best).
 - Photo should be in color and not black and white or sepia.
 - Avoid wearing dark, tinted glasses, hats or head coverings when taking the photo.
 - The system will accept various image formats, including jpeg and png.
- An uploaded copy of the front of the applicant's **North Dakota** state issued driver's license or **North Dakota** state issued non-driver identification card.
 - ✓ Please Note: copies of the driver's license or non-driver identification card can be submitted in various formats including jpeg, png, or pdf. If uploaded images are of poor quality, it could result in a delay in the application process.

- Name of health care provider who will be completing the written certification
- Email address of health care provider who will be completing the written certification
 - ✓ Please Note: health care provider information must be correct. Misspelling of a provider name or an incorrect email address could result in a delay in the application process.

Applicants will be asked three questions:

- Is the patient able to make their own medical decisions?
 - If answered “no” additional information will need to be provided.
- Does the patient intend to have a designated caregiver?
 - If answered “yes” additional information will need to be provided.
 - ✓ Please Note: a designated caregiver must submit a separate application specific to designated caregivers in order to receive a registry ID card and be able to purchase, assist in the use of, or possess products under the Medical Marijuana Program on behalf of a registered patient.
 - ✓ Please Note: a designated caregiver must provide the patient barcode number and patient name as part of their application.
- Is the patient a veteran?
 - If answered “yes” an additional question regarding health care services/treatment will need to be answered.

Medical Release of Information:

- As part of the application, an applicant must sign a medical release of information related to the applicant’s debilitating medical condition. This is required by state law for the program to certify the applicant as a Medical Marijuana Program participant.
 - ✓ Please Note: to prevent delays in the application process, it may be beneficial for an applicant to also complete a release of information from their health care facility that will allow the Division of Medical Marijuana access to medical information related to a patient’s qualifying medical condition. An applicant should consult with their health care facility regarding this.

Written Certification (to be completed by the patient’s health care provider):

- Once an applicant has submitted their health care provider’s full name and email address, the provider will be notified to complete the written certification for the applicant/patient. The applicant does **not** provide the written certification, as it will come directly from the health care provider.
 - ✓ Please Note: to avoid delays in processing the application, please ensure the health care provider’s name is spelled correctly and their work email address is entered correctly.

Application Fee:

- The **\$25 non-refundable application fee** can be paid in the following ways.
 - Online payment with a credit card, debit card, or electronic check. The online payment button is located towards the bottom of the application. The 'pay now' button will only be activated once an applicant has completed their application in its entirety and has clicked the submit button.
 - Please Note: if the blue button at the bottom of the application says 'save' rather than 'submit', it means that there is mandatory information missing from the application. Please review the application for any missing information. Once all required information is entered, the blue button at the bottom of the application will say 'submit'.
 - Check, cashier's check, or money order for \$25 made payable to the Dept. of Health and Human Services
 - Write the application barcode number (10-digit alphanumeric number) on the payment to ensure the payment gets posted to the correct account/application.
 - Mail payment to:
NDDHHS, Division of Medical Marijuana
600 East Blvd Ave, Dept 325
Bismarck, ND 58505
 - There is also a payment drop box at the physical location of the Division of Medical Marijuana. The Division of Medical Marijuana is located on the 2nd floor of the Judicial Wing (building connected to the capitol tower), door 202. The drop box is affixed to the wall across from door 202.

State Law and Administrative Rules:

- Applicants should be familiar with state law and administrative rules that govern the Medical Marijuana Program (NDCC Chapter 19-24.1 and NDAC Chapter 33-44-01), which can be found on the Division of Medical Marijuana website www.health.nd.gov/mm

Submitting Inaccurate, Incorrect, or False Information:

- Inaccurate or incorrect information could result in a delay in processing of an application.
- An applicant who knowingly submits false records or documentation required by the Division of Medical Marijuana to receive a registry identification card will be permanently disqualified from participating in the Medical Marijuana Program.
- A material misstatement by an applicant may result in the registry identification card being suspended or revoked.

Your BioTrackTHC Account:

Applicants can log into their BioTrackTHC account at any time to:

- View and edit certain information on their account
- View and edit an application that was started but not submitted
 - ✓ Please Note: once an application is submitted, the applicant will not be able to edit their application. If a change needs to be made, please contact the Division of Medical Marijuana.
- View their submitted application and track where it is at in the review and approval process.
- Check their 30-day maximum purchase limit balance.

For more information or if you need an accommodation, please email medmarijuana@nd.gov or call 701.328.1311.

Following the submission of all necessary application documentation and receipt of a written certification from the patient's health care provider, please allow 2-4 weeks for processing. You can track your application status by signing into your account. Delays in processing may result from incomplete information, payment not being received, or unclear photos or other uploaded documents.