

# CONNECTICUT MEDICAL MARIJUANA PROGRAM

## PATIENT REGISTRATION PROCESS

1 Start Here Register	2 Log In	3 Enter Caregiver Information if Applicable	4 Required Documentation	5 Fees
<p>Patients must create an account with the DAS Business Network to access the online certification system.</p> <p>Use the following link to register for a free account: <a href="https://biznet.ct.gov/dcp-mmpr">https://biznet.ct.gov/dcp-mmpr</a></p> <p><b>Please Note:</b> Make sure you have been certified by your physician before beginning the registration process.</p> <p>Follow all prompts and instructions during the process to ensure successful account creation and verification.</p> <p>After completing this one-time registration process and verifying your account via e-mail, you can log in and begin registration.</p>	<p><a href="https://biznet.ct.gov/dcp-mmpr">https://biznet.ct.gov/dcp-mmpr</a></p> <p>Log in using the e-mail address and password you established during the DAS Business Network registration process.</p> <p>Select the <b>"I am a Patient"</b> option and the system will prompt you to provide identifying information:</p> <ul style="list-style-type: none"><li>• Date of Birth</li><li>• E-mail Address</li></ul> <p>Review the information provided on the Patient Information webpage to ensure your information is correct.</p>	<p>Based on the patient's debilitating medical condition, the physician can authorize a caregiver, if needed.</p> <p>Patients must complete the caregiver information and include a valid e-mail address for the caregiver to be able to complete their portion of the application.</p> <p>The caregiver must:</p> <ul style="list-style-type: none"><li>• Manage the well-being of a registered patient with respect to their palliative use of marijuana.</li><li>• Be at least eighteen (18) years of age or older;</li><li>• Not be the patient's physician;</li><li>• Be responsible for only one (1) patient unless there is a parental, guardianship, conservatorship or sibling relationship with each patient.</li><li>• Be a parent, guardian or legal custodian where the adult patient lacks legal capacity.</li></ul>	<p>Select and upload one (1) of the following:</p> <ul style="list-style-type: none"><li>• Proof of Identity</li><li>• Proof of Residency</li></ul> <p>Certifications: Patients must read and affirm each statement on the webpage by selecting "Yes".</p>	<p>The patient application fee is \$100.00.</p> <p>The caregiver application fee is \$25.00.</p> <p>If mailing in the fee, please make check or money order is payable to:</p> <ul style="list-style-type: none"><li>• <b>Treasurer, State of CT</b></li></ul> <p>The Department will not accept cash payments.</p> <p>Connecticut Department of Consumer Protection Medical Marijuana Program 450 Columbus Blvd, Suite 901 Hartford, CT 06103</p> <p>A registration certificate expires one (1) year from the physician's certification date.</p>

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## CAREGIVER REGISTRATION PROCESS

### 1 Start Here Register

The caregiver must create an account with the DAS Business Network to access the online certification system.

Use the following link to register for an account:  
<https://biznet.ct.gov/dcp-mmpr>

Follow all prompts and instructions during the process to ensure successful account creation and verification.

After completing this one-time registration process and verifying your account via e-mail, you can log in and begin registration.

### 2 Log in

<https://biznet.ct.gov/dcp-mmpr>

Log in using the e-mail address and password you established during the DAS Business Network registration process.

Select the **"I am a Caregiver"** option and the system will prompt you to provide identifying information:

- Date of Birth
- E-mail Address

Review the information provided on the Primary Caregiver Information webpage to ensure your information is correct.

### 3 Required Documentation

Select and upload one (1) of the following:

- Proof of Identity

Certifications:

Caregivers must read and affirm each statement on the webpage by selecting **"Yes"**.

### 4 Fees

The caregiver application fee is \$25.00.

If mailing in the fee, please make check or money order payable to:

- **Treasurer, State of CT**

The Department will not accept cash payments.

Connecticut Department of Consumer Protection  
Medical Marijuana Program  
450 Columbus Blvd, Suite 901  
Hartford, CT 06103

A registration certificate expires one (1) year from the patient physician's certification date.



### Connecticut Department of Consumer Protection Medical Marijuana Program

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<https://ct.gov/dcp/mmpr>