

# PHYSICIAN PROCESS FOR PATIENT CERTIFICATION

1 Start Here Register	2 Log In	3 Certify Your Patient	4 Designate Caregiver for Your Patient (OPTIONAL)	5 You Are Done
<p>Physicians 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: <b><a href="https://www.biznet.ct.gov/dcp-mmprp">https://www.biznet.ct.gov/dcp-mmprp</a></b></p> <p>Please make sure to follow the prompts and instructions during the registration 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 registering patients.</p>	<p><b><a href="https://www.biznet.ct.gov/dcp-mmprp">https://www.biznet.ct.gov/dcp-mmprp</a></b></p> <p>Login using the e-mail address and password you established during the DAS Business Network registration process.</p> <p>Select the <b>“I am a Physician”</b> option and the system will prompt you to provide identifying information:</p> <ul style="list-style-type: none"><li>• DEA Number</li><li>• Last 4 digits of your social security number</li></ul> <p>Review the information provided in the Physician Profile webpage to ensure your information is correct.</p>	<p>Select “Add New Patient” to begin entering your patient’s information.</p> <p>Keep in mind:</p> <ul style="list-style-type: none"><li>• Qualifying patient must be a Connecticut resident.</li><li>• Qualifying patient must be at least eighteen (18) years of age or older.</li></ul> <p>During the registration process, physicians are required to enter a valid patient’s e-mail address (preferred method).</p> <p>For patients without an e-mail address, the system allows a physician to create a temporary e-mail address and password for their patient.</p>	<p>Based on the patient’s debilitating medical condition, the physician can authorize a caregiver, if needed.</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>Your patient is certified.</p> <p>Please remind your patient to complete their registration at:</p> <p><b><a href="https://www.biznet.ct.gov/dcp-mmprp">https://www.biznet.ct.gov/dcp-mmprp</a></b></p>