



STATE OF
OHIO
BOARD OF PHARMACY



Ohio Medical Marijuana Control Program Compliance Upload Portal Guidance Document

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**Ohio Medical Marijuana Control Program
Compliance Upload Portal Guidance Document**

Contents

Contents ii

I. Document Purpose, Audience and Topics covered 1

 A. Document Purpose 1

 B. Intended Audience 1

 C. Topics covered 1

II. Purpose and Use of the Document Upload Portal 1

III. Obtaining Forms Specified for Upload 2

IV. How to access the Compliance Upload Portal 3

V. Obtaining the Dispensary’s License Number and Security Code 3

VI. Uploading Document Types 4



I. Document Purpose, Audience and Topics covered

A. Document Purpose

This reference document is designed to provide a step-by-step guide to licensed dispensaries on uploading specified forms to the State Board of Pharmacy's "Compliance Upload Portal" website.

B. Intended Audience

The intended audiences for this document are dispensary Associated Key Employees responsible for submitting forms to the Board.

C. Topics covered

The topics covered in this guidance document include:

- Purpose and Use of the Compliance Upload Portal
- How to access the Compliance Upload Portal
- Creating Username and Password
- Uploading document types

II. Purpose and Use of the Compliance Upload Portal

The Board has developed a Compliance Upload Portal to allow for filing of compliance forms that require timely notification and response from the Board. The Compliance Upload Portal is not intended to accept all forms, but only those pre-identified as needing timely response. The following forms are documents that can be uploaded into the Compliance Upload Portal:

Request for Medical Marijuana Manual OARRS Submission Variance	Required when POS system is unable to file OARRS (PMP) data within 5 minutes of transaction.
Medical Marijuana Dispensary Operational Request	Required to request specified operational changes. See specifics below.
Medical Marijuana Dispensary Incident Report	Required to report specified incidents. See specifics below.
Medical Marijuana Licensee Compliance Report	Required to report specified alleged violations. See specifics below.
Medical Marijuana Dispensary License Surety Bond	Dispensary Surety Bond form.
Temporary Certificate of Authority Form	Request for temporary Designated Representative due to termination, death, or incapacitation.
Dispensary Written Notice of Business Discontinuance	Notice of business discontinuance.
Request to Sell Medical Marijuana Device	Device submission form for Marketing and Advertising review.
Dispensary Temporary Access Request	Request for temporary visitor access to designated areas of dispensary.
Medical Marijuana Dispensary Special Event Request Form	Request special events held at a licensed dispensary that involves persons other than patients, caregivers, or licensed dispensary employees, community events, festivals, fairs, conferences, educational events, and product shows.



Medical Marijuana Special Event Request Form	Required when requesting to host, attend, sponsor, or participate in a special event.
Medical Marijuana Dispensary License Escrow Form	Required for compliance with OAC 3796:6-2-11.
Employee Separation Form	Required upon termination or when a dispensary employee otherwise ceases to be employed with a dispensary.

The following forms must be used for the specified reporting:

Medical Marijuana Dispensary Operational Request

Hours of Operation Change	METRC Inventory Adjustment
Change Date/Time of Product Destruction	Change of Policy and Procedures
Storage of Records Offsite	Change of Location of Inventory Records
Other Compostable Mixed Waste	
Cancellation to Manually Enter Dispensation Data in PMP Clearinghouse	

Medical Marijuana Dispensary Incident Report

Error in Dispensing	Unauthorized Dispensary Access
Video Surveillance System Outage	Discover of fraudulent or Unlawful Recommendation
Adverse Action Against an Employee by Any Licensing Authority	Failure to Submit Dispensation Data to OARRS

Medical Marijuana Licensee Compliance Report

Theft, Loss, or Diversion of Medical Marijuana	Theft or Loss of Medical Marijuana Inventory or theft or Loss of Currency
Report Dispensary Employee Disqualifying Offense	Report Dispensary Employee Arrest, Charge, or Conviction for a Misdemeanor or Felony Offense
Violation of State Drug Laws	

Medical Marijuana Dispensary Special Event Request Form

Onsite Event at licensed Dispensary	Professional or Business Conference
Community Event	Fair or Festival
Educational Conferences	On-site Educational Events
Trade Show	Other, not specified

III. Obtaining Forms Specified for Upload

Only forms specified can be uploaded via the Compliance Upload Portal. All forms are available on the Board's website under the [Licensee Resource](#) tab. You can locate the tab by clicking on the link provided or going to medicalmarijuana.ohio.gov > **Programs** > **Licensee Resources** > **Forms and Guidance for Compliance Upload Portal**. Open the form needed. Some forms are fillable pdf



forms, so please complete the forms in the manner indicated. Once complete, scan the document and upload to the Compliance Upload system as described.

IV. How to access the Compliance Upload Portal

To access the Compliance Upload Portal users will go to the following website:
<https://www.pharmacy.ohio.gov/Licensing/DocumentUpload.aspx>

To upload a compliance document, users will need to enter the dispensary license number and Security Code provided by the eLicense Ohio system. If a user does not know their dispensary license number and Security Code, the eLicense Ohio system has a "License Verification" feature for License number lookup and the Board provides a password lookup feature based on the dispensary license number. If license number and Security Code are known, skip to "Uploading Document Types" below.

V. Obtaining the Dispensary's License Number and Security Code

- A. If you already know your Dispensary's license number and security code, proceed to VI 'Uploading Document Types' below.
- B. If license number and Security Code is unknown, follow these steps:
 - a. Click on to link, "Verification Page" as shown in fig. 1 below.

Fig. 1



- b. Next, click on business and enter the Business Name and the "Board of Pharmacy" as the Board Name as shown in fig. 2 & 3.

Fig. 2

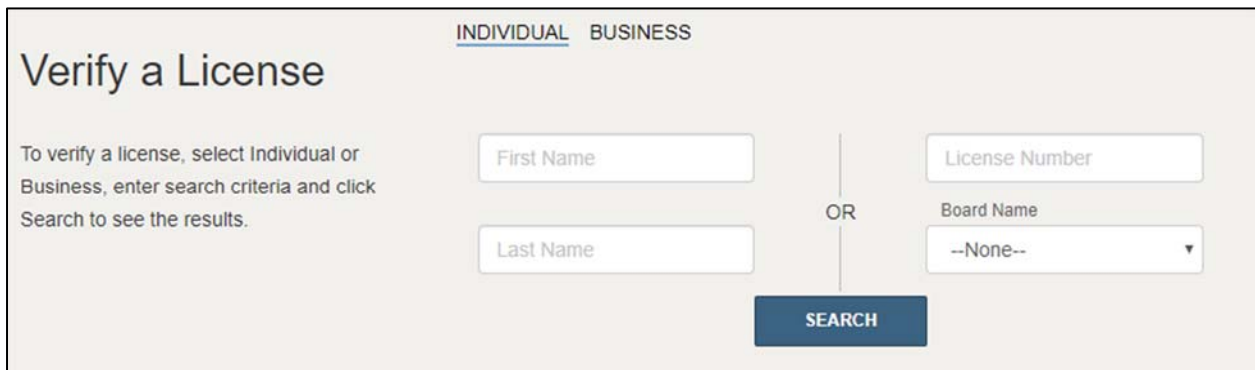


Fig. 3





- c. After determining the dispensary license number, the Security Code can be retrieved by clicking on the “Look Up Your Security Code” link at the bottom of the Document Upload page, as shown in fig. 4 below.

Fig. 4

Your license number:

SUBMIT

If you cannot provide the information requested on this page, you may send an email to Licensing@Pharmacy.Ohio.Gov to request your license number and security code. Be sure to include the license number (if available), name of licensee, location of licensee if a business, phone number and your full name in the body of the email. Please allow up to four business days for a reply.

VI. Uploading Document Types

- A. On the Compliance Upload Portal Website, enter the Dispensary License number and Security Code as shown in fig. 5 below.

Fig. 5

License Number

Security Code

LOG IN

[Related Links](#)
[Look Up Your Security Code](#)

- B. On the Compliance Upload Portal document upload page (Fig. 6):
 - a. Verify the email address is correct.
 - b. Under document type, choose the document type that corresponds to the document title on the form.
 - c. Click “Submit Document”.



Fig. 6

DOCUMENT UPLOAD

Use the fields below to upload your license document(s)

[LOG OUT](#)

Logged in as:
Name: MMCP OSBP Test
License Number: MMD. 0000001
License Type: Medical Marijuana Dispensary - Certificate of Operation

Email Address(s)
**use ; to separate multiple*

Document Type

Select PDF File No file chosen

[SUBMIT DOCUMENT](#)

Related Links
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