

MISSISSIPPI STATE DEPARTMENT OF HEALTH

Renewal or Update That is the question.

I have my Patient Card and I don't know if I need an Update or a Renewal.

When you obtain your Patient Card from the Mississippi Department of Health, your license fee is for one year. However, your practitioner may give you a shorter time for your certification. In that case, after you revisit your practitioner and they issue a new certification, you will need to "create a Patient Update" to extend the timeframe on your license. There is no charge for a Patient Update.

At the end of the annual license, you will need to "create a Patient Renewal" and pay the fee again.

Scenario	Action to be Taken
I got married and I need to update my name on my Patient Card.	Create a Patient Update
I need to update my email address on my Patient Card.	Create a Patient Update
I need to update my phone number on my Patient Card.	Create a Patient Update
I need to update my residence address on my Patient Card.	Create a Patient Update
I need to update my mailing address on my Patient Card	Create a Patient Update
I went back to see my Practitioner and received a new Certification.	Create a Patient Update
I need to update my caregiver information.	Create a Patient Update
I need to submit an additional document.	Create a Patient Update
I have had my card for 1 year and it is about to expire.	Create a Patient Renewal
My practitioner only gives me 3 months at a time.	Create a Patient Update
My license has expired.	Call our office for assistance at 601.206.1540

Review the following scenarios to determine the action that should be taken.



MISSISSIPPI STATE DEPARTMENT OF HEALTH

How to create a Patient Update:

- 1) Login to the portal
- 2) Choose Create a new application





MISSISSIPPI STATE DEPARTMENT OF HEALTH

3) Click "I am a Patient" → "Patient Update" → "Create Application"



4) Next you will need to select the license number (your PATS number on your card) that you want to update.

Applications / Patient Update A	pplication				
LICENSE INFORMATION	GENERAL INFORMATION	CONTACT INFORMATION	CERTIFYING PRACTITIONER/ CONDITION INFORMATION	CAREGIVER INFORMATION	QUESTIONS AND ATTESTATION:
	Please s	elect the applicable license numb	er from the drop down. Please note: If your license has be	en deactivated or is expired, it may	not appear in the drop down.
License Number*			Ŧ		
This field is required Please select the license number a	associated with the registration you wis	h to update.			

- 5) Next, you will need to answer "Yes" to all items you want to update:
 - a. Name (if you are changing your name, supporting documents will be required. i.e. marriage license, divorce papers, new driver's license).
 - b. Email address or phone number.



MISSISSIPPI STATE DEPARTMENT OF HEALTH

- c. Change residence or mailing address.
- d. Update your Practitioner Certification.
- e. Update your Caregiver Information.
- f. Submit an additional document.

After you answer yes to all applicable changes, click Save at the bottom.

Applications / Patient Update Application						
LICENSE INFORMATION GENERAL INFORMATION	CONTACT INFORMATION	CERTIFYING PRACTITIONER/ CONDITION INFORMATION	CAREGIVER INFORMATION	QUESTIONS AND ATTESTATIONS	DOCUMENTS	REVIEW
Please select the applicable license number from the drop down. Please note: If your license has been deactivated or is expired, it may not appear in the drop down.						
License Number * Please select the license number associated with the regi	istration you wish to update.					
Do you want to update your name?				No		
Do you want to update your email address or phone num	iber?			No		
Do you have a change to your residence or mailing addre	ess?			No		
Do you need to update your Practitioner Certification?			0	No		
Do you want to update your caregiver information?			0	No		
Do you want to submit an additional document?			0	No		

- 6) If you are updating your Practitioner Certification, you must answer Yes to that question. On the "Certifying Practitioner / Condition Information tab", you must click "View Available Certification", then choose the most recent date of your visit, click "Update" and save at the bottom.
- 7) Proceed thru the rest of the application. Submit at the end.

If you need help, please call our office 601-206-1540



MISSISSIPPI STATE DEPARTMENT OF HEALTH

How to create a Renewal:

- 1) Login to the portal
- 2) Choose Create a new application





MISSISSIPPI STATE DEPARTMENT OF HEALTH

3) I am a Patient \rightarrow Patient Renewal \rightarrow Create Application

New Application	×
You are creating a new application for:	
I am a * Patient	•
New Patient Registration	
Please switch accounts if you want to create an application for a different person or business.	
CREATE APPLICATION	

- 4) Next you will need to select the license number (your PATS number on your card) that you want to renew and click Save.
- 5) Continue thru the application, save at the bottom of each screen, and submit.

If you need help, please call our office at 601-206-1540