

**Mission:** The Cannabis Regulatory Agency (CRA) will establish Michigan as the national model for a regulatory program that stimulates business growth while preserving safe consumer access to cannabis.

**Vision:** The CRA will:

- Improve Regulatory compliance through education and consultation
- Reduce barriers to professional licensure
- Enhance customer experience across all programs
- Provide efficient, effective, and timely services

**LARA Strategic Goal:** Improve Regulatory compliance through education and consultation

MMMP/HEMP SECTION				
Goal	Action Plan	Start Date	End Date	Complete
Use feedback and input from results of the 2023 MMMP Survey and communicate with patients about the program regarding the application process and changes at least three times a year.	Draft and send email by 12/15/24	11/15/2024	12/15/2024	Complete Email blast sent regarding renewals on 12/17/2024
	Draft and send email by 04/15/25	3/15/2025	4/15/2025	Complete Email blast sent regarding online accounts on 03/26/25
	Draft and send email by 08/15/25	7/15/2025	8/15/2025	Complete Email blast sent regarding CRA website on 08/20/25

APPLICATIONS SECTION				
Goal	Action Plan	Start Date	End Date	Complete
Create a resource guide for applicants outlining the administrative rule changes to the application process (what was vs. what is now)	Draft list of application rule updates	TBD	TBD	Rules did not advance this fiscal year. This should be completed in FY26.
	Create communication to be sent to stakeholders	TBD	TBD	
	Receive Director approval	TBD	TBD	
	Coordinate with IT to send communication to stakeholders	TBD	TBD	

FINANCIAL COMPLIANCE SECTION				
Goal	Action Plan	Start Date	End Date	Complete
Review communications, procedures, and OneNote to refine areas in the AFS review process that will help minimize delays and improve review time	Review communications (letters, emails, etc.) being sent to licensees to identify response delays and refine as needed.	10/1/2024	2/14/2025	We looked at all the documents, resources, and communication FCS currently has. We reviewed and updated needed items during the annual review to be consistent, as well as find any holes that led to processing delays. This was completed on 02/14/2025.  Procedures, letters, and OneNote all started getting their review after the 12/31/24 AFS reports were logged, and noncompliance reports were created (1/13/25). We like to review these items together to stay consistent on section changes and even minor edits. These items were reviewed from that start date and all finalized between 2/4/25 and 2/11/25. FCS staff were notified on the updated procedures on 2/14/25.
	Review procedures to identify unnecessary or inconsistent procedures and refine as needed.	10/1/2024	2/14/2025	
	Review OneNote to optimize review time and modify boilerplate language as needed.	10/1/2024	2/14/2025	
Request/Commence AA/ACA project for audits	Create Accela project/audit record (OSS/Field Ops??) workflow, reports for audits	10/1/2024	9/30/2025	Launched process map, procedures, and forms and are continuing to develop the process to complete the business requirements for when the Accela project kicks off in FY26. Drafts of the Business Requirements and Accela Discussion Topics document were finished on 4/10/25. However, much of their work was completed in Oct. 2024.
Create all associated procedures, forms, correspondence for financial audit	Create Procedures	10/1/2024	9/30/2025	Numerous procedures (21 in total) are drafted but not finalized. Awaiting official rule approval and the Accela project to mark as officially "complete". No specific dates as these 21 procedures were created and "completed" throughout the FY. This should be completed in FY26.  Numerous forms (18 in total) are drafted but not finalized. Awaiting official rule approval and the Accela project to mark as officially "complete". No specific dates as these 18 documents were created and "completed" throughout the FY (specifically March through Sept.). This should be completed in FY26.  Email languages (5 in total) are drafted but not finalized. Awaiting on official rule approval and the Accela project to complete. This should be completed in FY26. 3 pieces of correspondence were completed in March and 2 were completed in Sept.
	Create Forms	10/1/2024	9/30/2025	
	Create Correspondence	10/1/2024	9/30/2025	

LICENSE MAINTENANCE SECTION				
Goal	Action Plan	Start Date	End Date	Complete
Create educational resources for licensees [renewal applicants] to assist them in being compliant with marijuana business laws and rules	Draft initial resource document for licensees (renewal applicants)	7/10/2025	7/20/2025	Completed this action plan as outlined in column B. The resource was approved and is in use.
	Receive Division Director Approval	7/20/2025	8/27/2025	
	Receive Operations Director/Executive Director approval	8/27/2025	9/22/2025	
	Update Renewal Approval procedure to include sending copy of the resource when a renewal approval letter is issued	9/30/2025	9/30/2025	
	Update staff of update to Renewal Approval procedure	9/30/2025	9/30/2025	
	Begin sending resources with renewal approval email	9/30/2025	9/30/2025	
Run survey for feedback on AU Renewal Reminder Telephone Calls	Draft survey	11/26/2024	11/26/2024	Complete. Survey results reviewed. Overall feedback indicates that the reminder emails are enough.  AU renewal reminder calls ended March 10, 2025.
	Draft eblast	11/26/2024	11/26/2024	
	Receive Division Director Approval	11/27/2024	11/27/2024	
	Receive Operations Director/Executive Director approval	12/11/2024	12/11/2024	
	Request Survey to be created from PR	12/11/2024	12/17/2024	
	Run survey	1/6/2025	1/12/2025	
	Review responses	1/20/2025	1/20/2025	
	Implement feedback	1/20/2025	3/7/2025	

LARA Strategic Goal: Reduce barriers to professional licensure

APPLICATIONS SECTION				
Goal	Action Plan	Start Date	End Date	Complete
Obtain feedback and input from industry stakeholder meetings regarding the application process and adopt suggested changes as applicable	Determine if any improvements can be made based on the feedback received	8/1/2025	9/30/2025	An email was sent to 3 stakeholder industry groups (MiCIA, Chaldean American Chamber of Commerce, and Cannabis Law Section) on 8/20/2025. All responses are due by COB 9/3/2025. Upon receiving feedback from these stakeholder groups, we will review and determine if any feedback provided can be incorporated into the application process. Any implementation, if applicable, will be done in FY 26.

LICENSE MAINTENANCE SECTION				
Goal	Action Plan	Start Date	End Date	Complete
Research best practices across other states to assist in licensing and regulatory changes at the legislative, policy, and process levels.	Review of new and existing Basecamp Message Board posts for information from other state regulators on licensing-related matters	10/1/2024	9/30/2025	Complete. CANNRA Basecamp communications were monitored during the fiscal year. Regularly reviewed posts from other states. When a post is created by a CANNRA Member on Basecamp or a response to a Basecamp post is submitted, an Outlook email is received to my "Basecamp" folder in my Outlook. New messages in the "Basecamp" folder are reviewed on a weekly basis. 889 messages (posts/responses) were reviewed over FY25.
	Based on research of best practices across other states, review procedures to determine if adjustments need to be made with processes; make updates as needed	10/1/2024	9/30/2025	Complete. Receivership/Licensing CANNRA committee started to discuss receivership processes and other licensing topics. Actively engaged with this committee and facilitating conversations. Licensing Division Director is chairing the committee at this time. 11/8/2024 CANNRA Receiverships planning meeting; 12/9/2024 All-CANNRA Receiverships discussion; 1/13/2025 CANNRA Receiverships planning meeting; 2/24/2025 Receiverships ad hoc meeting; 9/24/2025 Receiverships ad hoc meeting. No updates to our processes at this time.

FINANCIAL COMPLIANCE SECTION				
Goal	Action Plan	Start Date	End Date	Complete
Monitor and implement any statutory changes to the MMFLA and MRTMA	Review statutory changes and identify whether process changes are required.	TBD	TBD	Rules did not advance this fiscal year. This should be completed in FY26.
Review rules and make recommendations where additional or modified rule language is needed	Review prior disciplinary referrals and rules to identify where rules are needed to allow enforcement.	TBD	TBD	
	Create rules to provide framework for agency audit of licensees.	TBD	TBD	

LICENSE MAINTENANCE SECTION				
Goal	Action Plan	Start Date	End Date	Complete
Research best practices across other states to assist in licensing and regulatory changes at the legislative, policy, and process levels.	Review of new and existing Basecamp Message Board posts for information from other state regulators on licensing-related matters	10/1/2024	9/30/2025	Complete. CANNRA Basecamp communications were monitored during the fiscal year. Regularly reviewed posts from other states. When a post is created by a CANNRA Member on Basecamp or a response to a Basecamp post is submitted, an Outlook email is received to my "Basecamp" folder in my Outlook. New messages in the "Basecamp" folder are reviewed on a weekly basis. 889 messages (posts/responses) were reviewed over FY25.
	Based on research of best practices across other states, review procedures to determine if adjustments need to be made with processes; make updates as needed	10/1/2024	9/30/2025	Complete. Receivership/Licensing CANNRA committee started to discuss receivership processes and other licensing topics. Actively engaged with this committee and facilitating conversations. Licensing Division Director is chairing the committee at this time. 11/8/2024 CANNRA Receiverships planning meeting; 12/9/2024 All-CANNRA Receiverships discussion; 1/13/2025 CANNRA Receiverships planning meeting; 2/24/2025 Receiverships ad hoc meeting; 9/24/2025 Receiverships ad hoc meeting. No updates to our processes at this time.

**LARA Strategic Goal:** Enhance customer experience across all programs

FINANCIAL COMPLIANCE SECTION				
Goal	Action Plan	Start Date	End Date	Complete
Review AFS report schedules and forms to determine if modifications are needed to streamline the process	Review FY24 reports received to ensure that schedules are effective in providing necessary information and modify report composition for FY25 as appropriate. Use Power BI to review FY23 and FY24 for updates and feedback.	10/1/2024	5/31/2025	AFS Report was reviewed and updated for FY25. The FY25 AFS Report was completed on 12/30/2025 and released to the public/licensees along with the instruction booklet and advisory bulletin.  All internal documents, resources, and the website for FY25 was reviewed and updated for FY25. This information was completed on 02/14/2025. Please note, the review of these items were started on 1/13/2025.
	Review other forms to identify unnecessary or unclear areas and revise as necessary.	10/1/2024	5/31/2025	The last item completed was the internal analyst checklist. This was completed on 05/07/2025.

MMMP/HEMP SECTION				
Goal	Action Plan	Start Date	End Date	Complete
Utilize monthly reports, procedures, audits and managers audit to ensure MMMP works is conducted in a timely fashion and in accordance with our procedures	Run monthly reports to ensure we are meeting our scorecard metrics	10/1/2024	9/30/2025	Complete. This is ongoing each month. Spreadsheet updated on shared drive.
	Have staff audit daily worked	10/1/2024	9/30/2025	Complete. This is ongoing each month. Spreadsheet updated on shared drive.
	Manager audit daily audit log	10/1/2024	9/30/2025	Complete. This is ongoing. Spreadsheet updated on shared drive. Audited on 10/22/24, 12/3/24, 1/16/25, 2/4/25, 3/19/25, 4/3/25, 4/22/25, 6/2/25, 7/1/25, 7/24/25, 9/10/25, 9/29/25

LICENSE MAINTENANCE SECTION				
Goal	Action Plan	Start Date	End Date	Complete
Monitor incoming complaints/suggestions related to license-maintenance processes quarterly to determine if changes in processes are needed	Track incoming complaints/suggestions related to existing license-maintenance processes	10/1/2024	9/30/2025	Complete. --Suggestion received 5/6/2025: Ability to group renewals together [one record/one set of documents per location (with the fee adjusted based on plant count) instead of 150 records for 1 location] This is a system limitation and not something we are able to modify at this time.  --Attorney complaint 6/3/2025: Deficiency notice delayed due to waiting for a municipal response. This feedback was adopted. The AU renewal procedure Send Renewal Application for Initial Audit was updated 6/10/2025 to have staff send renewal applications to audit while municipal response is only remaining item.
	Based on incoming complaints/suggestions, review procedures to determine if adjustments need to be made with processes; make updates as needed	10/1/2024	9/30/2025	Complete. Adjustments or reason for lack of adjustment noted to each specific comment received in the box above.

APPLICATIONS SECTION				
Goal	Action Plan	Start Date	End Date	Complete
Review statutes/rules/policies to identify and make recommendations where additional or modified rule language or policy is needed	Audit existing application process and procedures against statutes/rules/policies to determine if/where the process can be streamlined	10/1/2024	9/30/2025	Application process was reviewed in June 2025. No processes to be streamlined as the process is consistent with statutes/rules/policies.
	Determine if new policy determinations are needed - escalate and provide recommendations as applicable	10/1/2024	9/30/2025	Application policies were reviewed in August 2025 and was determined no new application policies were needed.

**LARA Strategic Goal:** Provide efficient, effective, and timely services

MMMP/HEMP SECTION				
Goal	Action Plan	Start Date	End Date	Complete
Monitor incoming complaints/suggestions related to MMMP/Hemp Processor Handler processes quarterly to determine if changes in processes are needed	Track incoming complaints/suggestions related to existing processes	10/1/2024	9/30/2025	Made ACA Change suggestions to Licensing Director who approved on 03/07/25. Escalated to Assistant Ops Director on 03/10/25. In consultation with our IT team, we were informed the suggestions were not possible for our specific Accela instance. However, they did add them to Accela's product enhancement list and IT will monitor feedback.  No additional complaints or suggestions were received.
	Based on incoming complaints/suggestions, review procedures to determine if adjustments need to be made with processes; make updates as needed	10/1/2024	9/30/2025	

APPLICATIONS SECTION				
Goal	Action Plan	Start Date	End Date	Complete
Review reports, communications, and audits to determine if there are any areas that require updates to enhance the application process	Run and review time tracking reports (2-3 times per week) to ensure staff are meeting internal metric timeframes	10/1/2024	9/30/2025	Managers run reports 2-3 times per week to ensure internal application processing metrics are being met.
	Review communications (letters, emails, etc.) being sent to applicants to identify processing delays	10/1/2024	9/30/2025	Application communications were reviewed in June 2025, however, no improvements to the communications were deemed necessary.
	Complete monthly audits on step 1 and step 2 applications	10/1/2024	9/30/2025	Manager audits are completed once a month to ensure the application process is followed according to process and procedure. The manager audits occurred on 11/8/24, 12/13/24, 1/5/25, 2/5/25, 3/3/25, 4/2/2025, 5/2/2025, 6/3/2025, 7/2/2025, 8/6/2025, 9/16/2025, 10/3/2025.
	Provide staff training on application processes	10/1/2024	9/30/2025	Staff training was provided on the new process of generating GIS Maps for all step 2 applications on 7/24/2025.

LICENSE MAINTENANCE SECTION				
Goal	Action Plan	Start Date	End Date	Complete
Review time-tracking reports, audits, and outgoing communications from LMS to determine if adjustments need to be made with staff task assignments or if additional training is needed	Run and review time-tracking reports to ensure staff are efficient, effective, and timely	10/1/2024	9/30/2025	Complete - reports ran regularly to ensure staff operating according to process and procedure.
	Perform monthly application audits on Renewal and Amendment applications	10/1/2024	9/30/2025	Complete - monthly audits were completed on adult-use renewal application, medical facility renewal application, amendment applications, and lapsed supplemental applicants/MWBC. Audits were completed on 11/14/2024, 12/9/2024, 1/2/2025, 1/3/2025, 1/6/2025, 1/10/2025, 2/13/2025, 3/24/2025, 3/30/2025, 3/31/2025, 4/2/2025, 4/4/2025, 5/5/2025, 6/29/2025, 6/30/2025, 7/2/2025, 8/5/2025, 8/7/2025, 8/13/2025, 8/14/2025, 8/18/2025, 9/2/2025, 9/9/2025, 9/16/2025, 9/21/2025, 9/22/2025, 9/25/2025, 10/1/2025, 10/2/2025
	Spot-check outgoing communications to ensure staff are efficient, effective, and timely	10/1/2024	9/30/2025	Complete - communications were spot-checked to ensure staff operating according to process and procedure. Communications spot-checked during audits on 11/14/2024, 12/9/2024, 1/2/2025, 1/3/2025, 1/6/2025, 1/10/2025, 2/13/2025, 3/24/2025, 3/30/2025, 3/31/2025, 4/2/2025, 4/4/2025, 5/5/2025, 6/29/2025, 6/30/2025, 7/2/2025, 8/5/2025, 8/7/2025, 8/13/2025, 8/14/2025, 8/18/2025, 9/2/2025, 9/9/2025, 9/16/2025, 9/21/2025, 9/22/2025, 9/25/2025, 10/1/2025, 10/2/2025
	Track staff errors/inefficiencies	10/1/2024	9/30/2025	Complete - errors tracked as a result of the manager reviews completed on 11/14/2024, 12/9/2024, 1/2/2025, 1/3/2025, 1/6/2025, 1/10/2025, 2/13/2025, 3/24/2025, 3/30/2025, 3/31/2025, 4/2/2025, 4/4/2025, 5/5/2025, 6/29/2025, 6/30/2025, 7/2/2025, 8/5/2025, 8/7/2025, 8/13/2025, 8/14/2025, 8/18/2025, 9/2/2025, 9/9/2025, 9/16/2025, 9/21/2025, 9/22/2025, 9/25/2025, 10/1/2025, 10/2/2025
	Reassign staff tasks as needed	10/1/2024	9/30/2025	Complete. Additional staff (3 analysts) hired FY25 to assist with caseloads.
	Retrain staff as needed	10/1/2024	9/30/2025	Complete. No retraining needed at this time. Discretion training for ENF review was completed at August in-person LMS staff meeting as this is a newer processes for renewal review.

FINANCIAL COMPLIANCE SECTION				
Goal	Action Plan	Start Date	End Date	Complete
Monitor section processing metrics using Accela reports, audits, and manager audits to ensure timely processing and adhering to procedures	Run and review time-tracking reports to ensure staff are being efficient and meeting section metrics.	10/1/2024	9/30/2025	<p>Audits are completed daily/based on reports being completed.</p> <p>Manager audits have been completed once a month, while review of metrics and reports were done weekly (as they were sent with the weekly reporting numbers to Desmond and Wil).</p> <p>Manager Audits were completed on: 10/3/24, 11/6/24, 12/4/24, 1/3/25, 2/3/25, 3/3/25, 4/2/25, 5/1/25, 6/3/25, 7/1/25, 8/4/25, and 9/3/25.</p>
	Conduct audits and manager audits.	10/1/2024	9/30/2025	<p>All audits are uploaded to the licensee's Accela record (which includes record, full, and manager audits).</p> <p>Analyst metrics were looked at during audits, as well as during monthly reviews of the "Analyst Workflow Metrics" report pulled from Accela. The Analyst workflow metrics show the # of days reports are in a specific status/workflow. These numbers are compared to the job aid, "FCS Internal Metrics". No retraining was needed, but some analysts were reminded of the first metric (initial review days) as this is the closest number to going over our section goal.</p>
	Provide retraining where needed to ensure section metrics are met.	10/1/2024	9/30/2025	<p>Analyst metrics were looked over on: 10/1/24, 11/4/24, 12/3/24, 1/7/25, 2/4/25, 3/4/25, 4/1/25, 5/6/25, 6/3/25, 7/1/25, 8/5/25, and 9/3/25.</p>