MEDAVIE BLUE CROSS™

MANDATORY GENERIC SUBSTITUTION EXCEPTION REQUEST

If your healthcare professional confirms there is a documented allergy, or documented intolerance, to a non-active ingredient found in the generic(s) but not in the brand (ie: allergic or intolerant to lactose), or the drug you are taking is considered Narrow Therapeutic Index (NTI), we do not require a completed copy of the Health Canada form, simply have your Healthcare Professional document below.

For this request to be processed, please complete the following:

TO BE COMPLETED BY PATIENT (PLEASE PRINT)

Member Name	Group & Section Number	Identification Number
Patient Name	Relationship to Member O Member O Spouse O Dependent	Patient Date of Birth (DD/MM/YYYY)
Street Address		Telephone Number
City	Province	Postal Code

TO BE COMPLETED BY HEALTHCARE PROFESSIONAL

To be eligible for full reimbursement of the ingredient cost for the brand name drug requested, there must be medical evidence indicating that an adverse reaction/therapeutic failure has occurred.

Name of Brand Drug: _____

Note:If it has been demonstrated that an adverse reaction or therapeutic failure has occurred, a **long-term approval** will be placed on the patient's file and that **brand drug** will **reimburse at the brand price**.

O Adverse Reaction has occurred - a copy of patient's **Side Effect Reporting Form** sent to Health Canada on_____ is attached.
DD/MM/YYYY

O Other – Please document below

Healthcare Professional Name (please print)	
Healthcare Professional Telephone Number	Healthcare Professional Fax Number
Signature of Healthcare Professional	Date (DD/MM/YYYY)

Your request may be delayed if information is incomplete or contains errors. Any costs incurred for the completion of this request are the responsibility of the patient. Completed requests can be submitted as follows:

For Atlantic/Ontario	**For Quebec**
Fax: 1-800-670-2899 (Confidential Line)	**Fax:** 1- 514-286-8480 (Confidential Line)
Mail: Private and Confidential - Medavie Blue Cross c/o Special Authorization, Prescription Drugs P.O. Box 220, Moncton, NB E1C 8L3	**Mail:** Private and Confidential - Medavie Blue Cross c/o Special Authorization, Prescription Drugs C. P. 3300 Succursale B, Montreal, QC H3B 4Y5

If you wish to know the status of your request, please call our Customer Contact Centre at 1-888-873-9200.

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AUTHORIZATION

I understand that the personal information I have provided herein is collected and used by Medavie Blue Cross to administer the terms of my policy or the group policy of which I am an eligible member, recommend suitable products and services that I am eligible for as a member of a policy, and other applicable purposes, as described in the Medavie Blue Cross Privacy Statement at medaviebc.ca.

Depending on the type of coverage I carry, limited personal information such as claim, health and/or financial related data may be collected from and/or released to following third parties as required for the purposes of administering and managing the benefits outlined in the policy of which I am an eligible member. These third parties may include healthcare providers, other insurance companies, regulatory authorities and investigative bodies, services providers, and/or the cardholder of any contract under which I am a participant.

Where allowed by law, my information may be shared with Medavie Blue Cross employees or service providers in jurisdictions other than where it was collected. If I am a resident of Quebec, this includes transferring or disclosing my personal information to Medavie Blue Cross employees or service providers outside of that province.

I understand that my consent is only valid for the time it is needed to achieve the purposes outlined herein, unless I withdraw it. I understand I may withdraw my consent at any time. However, in some instances doing so may prevent Medavie Blue Cross from providing me with certain products or services that may be useful to me and/or my dependents. This consent complies with federal and provincial privacy laws.

For more details about our information practices, including how your personal information is protected, how to access or correct personal information, or if you have concerns or questions, please see our Medavie Blue Cross Privacy Statement available at medaviebc.ca or call 1-800-667-4511.

Signature: _____ Date (DD/MM/YYYY): _____

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