



Drug Advocacy Patient Consent and Authorization Form

Employee Information

Last Name	First Name	MI
Home Phone	Email	
Home Address		
City	Province	Postal Code
Employer Name		

Patient Information

Check if same as Employee Information

Last Name	First Name	MI
Home Phone	Email	
Home Address		
City	Province	Postal Code
Employer Name		Coverage? <input type="checkbox"/> Yes <input type="checkbox"/> No

Pharmacist Information

Full Name	Phone #	Fax #	Email
Address	City	Province	Postal Code

Medication Sought

Medication	Dose	Frequency	Medication	Dose	Frequency

My Beneplan Drug Advocate: _____

My signature below indicates I have read and consent to the Disclosures and Disclaimers on the back of this form. (If Patient is a dependent child or incapable of consent, the patient's substitute decision maker may sign this form). I hereby declare that the Beneplan Drug Advocate will be assisting me in securing access to the medication prescribed to me by my doctor. I hereby kindly request that the Trillium Drug Program and all other drug assistance programs co-operate with my Beneplan Drug Advocate to the extent allowed by the laws of the Province of Ontario.

Signature: **X** Date: _____

[Disclosures and Disclaimers at Back](#)



Disclosures and Disclaimers

Who is the Beneplan Drug Advocate?

The Beneplan Drug Advocate is an employee of Beneplan Inc. who is well versed in the logistics and inner workings of the Trillium Drug Program and many other drug assistance programs available to Ontario residents. The Drug Advocate will guide you and counsel you on applications to Trillium and other drug assistance programs. The advocate will speak for your and coordinate between you, your pharmacists, Trillium, and other drug assistance programs.

The Beneplan Drug Advocate will exert every effort to help you secure your drugs at as little out-of-pocket expense by you as possible.

Your Cooperation

It is imperative that you cooperate with the Beneplan Drug Advocate, Trillium, and other drug assistance programs. Failing to cooperate may delay or may result in outright failure to secure the medication.

Privacy and Confidentiality

Beneplan and the Drug Advocate will exert all efforts to keep your information confidential from all parties except for your pharmacist, the Trillium Drug Program, CRA, other insurance carriers (if you have coverage elsewhere), and other assistance programs as required.

Consult your Doctor

Never make any changes to your medication without first consulting your doctor.