

Government of the Northwest Territories Medical supplies and equipment PRIOR APPROVAL FORM FOR PHARMACISTS

Fax completed form to: Edmonton and area 780-498-3546 or toll free 1-855-498-3546

| 1. PROVIDER INFORMATION | | | |
|-------------------------|---|----------------------|-------------|
| Provider name | Alberta Blue Cross pharmacy provider identification number | Telephone number | Fax number |
| Street address | City / Town | Territory / Province | Postal code |

| 2. PATIENT INFORMATION | | | | | |
|------------------------|-------------|-------|-----------------------|----|---------------------------|
| Last name | First name | Alber | rta Blue Cross number | Da | ate of birth (YYYY/MM/DD) |
| | | | | | |
| Mailing address | City / Town | | Territory / Province | | Postal code |
| | | | | | |

| 3. PRESCRIBER INFORMATION | | | | |
|--|-------------|----------------------|--------------------------|--|
| Prescriber's name Telephone number Fax | | Fax number | License / billing number | |
| | | | | |
| Mailing address | City / Town | Territory / Province | Postal code | |
| | | | | |

4. PATIENT HEALTH INFORMATION

EHB program number

Explanation of benefit requirement and specific details of item to be provided. (MUST BE COMPLETED)

5. EQUIPMENT OR SUPPLIES REQUESTED

| 5. EQUIFINIENT OR SUFFLIES REQUESTED | | | | |
|--|------------------|--------------------|--|------------|
| One time use: Yes / No | Ongoing request: | equest: Yes / No T | | ed: |
| Description of equipment / device / supply | Benefit code | Quantity | | Total cost |
| | | | | |
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Privacy statement

The information on this form is being collected and used according to the federal privacy legislation for the purpose of determining or verifying eligibility for coverage for the items listed in section five of this form. The personal information provided herein will be kept confidential and secure. If you have any questions regarding the collection or use of this information, please contact an Alberta Blue Cross Privacy Matters representative toll free at 1-855-498-7302 or write to Privacy Matters, Alberta Blue Cross, 10009-108 Street, Edmonton, Alberta, T5J 3C5.

| FOR ALBERTA BLUE CROSS USE ONLY | | | | | | |
|---------------------------------|-----------------|---------------|-------------------|--|--|--|
| Application | Approval number | Authorized by | Date (YYYY/MM/DD) | | | |
| Approved Denied | | | | | | |
| Alberta Blue Cross comments: | | | | | | |

CONTACT INFORMATION

Alberta Blue Cross 10009 – 108 St Edmonton, AB T5J 3C5 **Pharmacy Services Provider Relations and Operations** Edmonton and area: 780-498-8370 Calgary and area: 403-294-4041 Toll free: 1-800-361-9632

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