

PEI SMOKING CESSATION PROGRAM: OUT OF PROVINCE TRAVEL DECLARATION

Patient Name	Days' Supply Needed (for travel only)	Personal Health Number (PHN)
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Note: Your pharmacist cannot determine the days' supply that is eligible for Pharmacare coverage.

I declare my intent to travel outside of Prince Edward Island (PEI) and hereby request that my prescription be filled in accordance with the PEI Smoking Cessation Program Travel Supply Policy.

I acknowledge and confirm the following:

- I am a registered Beneficiary in the PEI Pharmacare Smoking Cessation Program.
- I will be travelling outside of PEI from _____ to _____.
- I request that my eligible prescription be filled in accordance with the PEI Pharmacare Smoking Cessation Program Out-of-Province Travel Supply Policy.
- I acknowledge that coverage is subject to the standard rules of the PEI Pharmacare Drug Program.
- I understand that if I purchase a supply exceeding the maximum days' supply limit set by Pharmacare, only the maximum days' supply will be eligible for coverage.
- I accept full responsibility for the medications provided to me for my travel outside of PEI. PEI Pharmacare will not be held liable for any lost, stolen, or damaged medications.
- I understand that providing false or misleading information in this declaration may result in disqualification from receiving benefits under any PEI Pharmacare Drug Program, at the sole discretion of the Department of Health and Wellness and may lead to legal consequences.

I hereby make this declaration, believing it to be true and correct to the best of my knowledge.

patient signature

date

Please submit a signed copy to your pharmacy for retention in accordance with audit requirements set by the Chief Public Health Office.

Chief Public Health Office Contact Information:

Email: quitsmoking@gov.pe.ca

Phone: (902) 368-4319

Fax: (902) 620-3354.

Personal Health Information on this form is collected under Prince Edward Island's *Health Information Act*, as it relates to and is necessary for determining assessment of needs and eligibility for benefits under the PEI Pharmacare Program (Smoking Cessation Program). If you have any questions about this collection of Personal Health Information, you may contact the Provincial Tobacco Control Coordinator at 902-368-4319.