

Letter of Authorisation for Collection of Prescription Refills under the Chronic Disease Management Programme (CDMP) and/or the Community Health Assist Scheme (CHAS)

With effect from 19 May 2020, in appropriate cases, CDMP/CHAS patients may authorise individuals to collect prescription refills for their chronic conditions on their behalf¹.

CDMP/CHAS patients and their authorised persons are required to fill in this letter of authorisation, which should be presented to the clinic during collection. The original (i) personal identification card or document (including NRIC/Student ID/Birth Certificate) and CHAS/MG/PG cards (where applicable) of both the CDMP/CHAS patient and the authorised person must also be presented to the clinic during collection.

Section A: For CDMP/CHAS patient's acknowledgement

I, _____ [***name of CDMP/CHAS patient***] authorise _____ [***name of authorised person***] to collect prescription refills for my chronic conditions on my behalf on _____ [***DD/MM/YYYY***]. I agree that he/she will be responsible for ensuring that the medication is safely delivered to me.

Section B: For authorised person's acknowledgement

I, _____ [***name of authorised person***] declare that I have been authorised by _____ [***name of CDMP/CHAS patient***] to collect his/her prescription refills on his/her behalf on _____ [***DD/MM/YYYY***]. I agree to the following:

- i. to pay the bills in relation to the prescription refills (after MediSave/CHAS subsidies have been applied) on the CDMP/CHAS patient's behalf;
- ii. to check that I have collected the right medication for the CDMP/CHAS patient and safely deliver the medication to him/her; and
- iii. to indemnify the CDMP/CHAS clinic and/or the Government against all losses, expenses, costs, damages and liabilities that may be suffered or incurred by the clinic/Government arising out of or in connection with any false declaration or improper conduct on my part.

**Signature & NRIC No. of
CDMP/CHAS Patient:**

**Signature & NRIC No. of
authorised person:**

¹ To ensure that chronic conditions are regularly managed, please note that collection of prescription refills on a CDMP/CHAS patient's behalf can only be done for a period of six months since the CDMP/CHAS patient's last doctor's consultation.