



Pre-Certification Check List

Dear Ozanam Charitable Pharmacy Applicant and/or Certifying Agency Representative:

Thank you for your interest in Ozanam Charitable Pharmacy Services. In order for us to process your pharmaceutical request, we must have the following questions and information answered before you are approved for Ozanam Pharmacy services:

1. **Is patient a resident outside of Mobile, Baldwin or Escambia County?** Yes NO
2. **Does patient have any prescription coverage, for example VA, Medicare D, Medicaid or private insurance? (If the patient has high co-pays, they should work with their doctor to prescribe covered medications on their insurance formulary).** Yes NO
3. **Is the medication price below \$4.00?** Yes NO
4. **Is the patient's income above 200% of the Federal Poverty Level?** Yes NO

If you answered YES to any of the above questions, patient does NOT qualify.

Required Documentation for Certification

- Driver's License or Photo ID**
- Current bill with address**
- Price list, printout or receipts for medications or from their pharmacy**
- Household Income (Blood related or not) information to include all that apply:**
 - Statement showing social security, disability, retirement benefits, food stamp letter.**
 - Pay check stubs or tax return (1099 or W-2 are also accepted.)**
 - Any other document the patient thinks may be relevant to their financial situation.**

Referred to PAP for the following medications: _____
