## **HUME AND WHITTLESEA PHARMACY WAIVER PROGRAM**

## Whittlesea Community Connections

Shop 111, Pacific Epping, 571-583 High Street, Epping VIC 3076

T: (03) 9401 6666

E: pharmacywaiver@cabrini.com.au



REFERRER DETAILS			Referral date:
Client has consented to referral: ☐ Yes ☐ No (referral cannot be accepted if client has not consented)			
Referring organisation:	☐ GP ☐ Community	Health 🔲 Case Managemer	nt
	☐ Other Name of serv	ice:	
Referrer name:		Role:	
<u>T:</u>	F:	E:	
CLIENT DETAILS			☐ Male ☐ Female ☐ Other
Surname:			Preferred Pronouns:  ☐ She/Her ☐ He/Him ☐ They/Them
First name:			Date of birth:
Address:			
Mobile:		Year of arrival to Australia: _	□ Boat or □ Plane arrival
Country of birth:			Ethnicity:
Languages spoken:			Interpreter required:
Current visa type:			Applied for Protection Visa:  Yes No
(please supply/attach copy if available)			
Medicare:	☐ Yes ☐ No	Medicare No.:	
SRSS:	☐ Yes ☐ No	Medicare expiry date:	
SRSS provider (if relevan	t): $\square$ AMES or $\square$ Life W	ithout Barriers	
Work rights:	☐ Yes ☐ No		
Employment status:			
Income:			
Support from any other	agency:		

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# REFERRAL WILL NOT BE CONSIDERED UNTIL VISA DOCUMENTATION IS PRESENTED

# Service description

- The Hume and Whittlesea Pharmacy Waiver Program aims to give people seeking asylum who have no income access to essential medications
- The program is operated by Cabrini Outreach in partnership with Whittlesea Community Connections

# **Eligibility**

People seeking asylum who:

- Have no Medicare card or have a Medicare card with limited or no income support (no access to Centrelink)
- Have a referral letter from a GP or relevant community-based health service or organisation working with people seeking asylum (e.g. AMES, LWB, Red Cross, ASRC, WCC, Spectrum, Foundation House refugee health program)
- Not receiving support from SRSS (Status Resolution Support Services), AMES, Life Without Barriers, or IHMS (International Health and Medical Services)
- Have evidence of visa documentation and protection visa application

#### Cost

All services provided through the program will be of no charge to the client.

## Administration process

- Medical prescription received along with your local GPs referral letter if possible (if patient is a self-referral then proof of residence is required) emailed to pharmacywaiver@cabrini.com.au
- Eligibility assessed visa documents or status identification documents, ID card, Medicare card and income
- Complete the pharmacy waiver eligibility form with the program assistant
- Pharmacy waiver letter is provided to the client by the program assistant at Whittlesea Community Connections, or via email, to take to the participating pharmacy to allow dispensing of prescribed medication at no cost to the client

### Additional referral documentation

- Please attach a copy of any relevant documentation
- Script medications only