# Template Letter of Consent

[Manufacturer's letterhead]

[Date]

Director

Drug Programs Policy and Strategy Branch

Health Programs and Delivery Division

Ministry of Health

3rd Floor, 5700 Yonge Street

Toronto, ON M2M 4K5

Dear Director:

## RE: [Product name/generic name, strength, and dosage form (the “Product”) manufactured by <name of manufacturer> (“the Manufacturer”)].

Pursuant to the requirements under the *Ontario Drug Benefit Act* and *Drug Interchangeability and Dispensing Fee Act* (as applicable) but subject to the limitation concerning confidentialpricing information set out below, this letter authorizes His Majesty the King in right of Ontarioas represented by the Executive Officer of Ontario Public Drug Programs of the Ministry ofHealth (the “Ministry”), both during and after the Ministry’s Productevaluation process, to:

1. collect and use information pertaining to the Product and the Manufacturer in the possession of Health Canada, the government of any province or territory in Canada, the Patented Medicine Prices Review Board, Canada’s Drug Agency, or Ontario Health (the “Public Organizations”); and
2. disclose information pertaining to the Product and the Manufacturer in the possession of the Ministry to any of the Public Organizations.

Despite the foregoing, neither the Manufacturer nor the Ministry will disclose to any of the Public Organizations any confidential pricing or commercial terms in respect of the Product that are specific to Ontario Public Drug Programs unless the other party has been notified and has authorized the disclosure in writing.

[Signature]

[Name and Title of Senior Company Official]

I have authority to bind the Manufacturer