



2745 REBECCA LANE
ORANGE CITY, FL 32763

917 RINEHART ROAD
SUITE 2031
LAKE MARY, FL 32746

(PH) 386-775-2012 (FAX) 386-775-2013

DISABILITY/FMLA FORM POLICY

At Central Florida Bone and Joint Institute, our patients are at the center of all that we do. Our physicians and team members are committed to providing the highest quality care during all stages of your treatment. With this in mind, we want to share our process for completing Disability and FMLA forms.

Our policy regarding completion of all forms is as follows:

- ▶ Forms and a signed authorization to release medical information may be delivered directly to the office or faxed to (386) 775-2013.
- ▶ Our fee to complete **EACH** form is \$50.00. This is payable by cash or credit card. CareCredit cannot be used to pay this fee. This fee must be paid prior to the completion of the form(s) either at the time of delivery or if faxed it may be paid by a telephone credit card transaction. Payment must be paid prior to being completed even if the disability carrier/employer has faxed the forms to our office. The patient will be contacted for payment prior to proceeding with the completion of any paperwork.
- ▶ The patient information portion of the form must be completed prior to processing.
- ▶ Once we receive your form(s) and your signed authorization to release your medical information, please allow 7 to 10 business days for processing of the form(s).
- ▶ All completed forms will be mailed or faxed to the disability carrier/employer as indicated by the patient, the instructions of the carrier/employer if faxed, or may be picked up at our office by the patient or a designated representative on the patient's HIPAA form.

Patient Acknowledgement

Date