

SNBCare Documentation Policy

The only documentation regarding your health or illness required by law (and included in the office visit charge) is an office visit note. Completing paperwork for any leave from work, Family Medical Leave Act (FMLA) claims, longterm care, life insurance, the Department of Veterans' Affairs, disability claims or other purposes is unnecessary duplication and goes beyond routine medical care. Therefore, it cannot be billed to your insurance company.

Since all forms require the provider's signature, they are personally responsible for the accuracy of the information provided. Incomplete or inaccurate information may have farreaching consequences for your case. For this reason, you must be a patient of SNBCare for at least six months before any documentation will be completed. Filling out forms requires careful consideration and a considerable amount of the provider's time.

Therefore, it is our office policy to charge for the completion of any form. You can avoid being charged for the form completion by requesting that the requester accepts a copy of the office visit note in lieu of a form. (For example, there is no requirement to use the FMLA form by employers. The employer just needs to know that the medical condition is real and qualifies for FMLA leave.) We can send to the designated recipient a copy of the last office note free of charge. If you wish us to do so, please fax us a signed Consent to Release with the relevant party's information.

By signing below, I understand the following with regard to additional documentation:

1. I understand that I must be seeing my current treating provider for a minimum of 6 months in order for my provider to fill out any paperwork.
2. I understand that completion of any forms will incur a \$65 charge.
3. I agree to make the payment for my documentation visit before my visit with the provider and understand that failure to do can result in cancellation of my appointment.
4. I understand that an appointment is required to fill out the documents with the provider to ensure accuracy, subject to provider availability.
5. I understand that paperwork will not be completed if it has been longer than 3 months since the last appointment with my treating provider.
6. I understand that paperwork will not be completed if all sections of the form to be completed by the patient are not filled out prior to SNBCare receiving the form.

Patient Signature:

Date