



Allergy & Rheumatology Associates, LLC

Michelle Spuza-Milord, M.D., F.A.C.R.
Ginige Swanthri De Silva M.D., F.A.C.R.

Form Fee Agreement

Many changes in the healthcare system have resulted in a tremendous increase in the volume of information requests to our practice. The time and effort involved in providing these detailed reports results in significant costs, especially when multiplied over volume of patients our practice serves. The completion of these forms represents an administrative service to our patients above and beyond the provision of medical care. Refusal of insurance and requesting agencies to cover costs requires us to institute a policy of charges to complete the following forms:

No Charge:

Disabled Parking Applications
Return to work/school statements

\$25 FMLA Paperwork

\$125 Disability Status (initial)

\$75 Disability Updates

\$200 Functional Capacity Exam or Narrative Letter

\$25 Miscellaneous forms requiring detailed medical information not otherwise listed above

****Please be aware that our physicians DO NOT provide court appearances regarding medical cases since we do not accept workers' compensation nor liability cases****

I have read and understand the above form fee agreement. By signing I agree to comply with the policy of Allergy and Rheumatology Associates, LLC. I am aware these fees need paid before the requests will be completed.

Name

Date

Signature

Fees subject to change without notice.