

## **Forms Completion FAQ**

Office Number: 203.734.7900

### **Q: Where do I turn in my FMLA or Disability form?**

**A:** We offer three ways to get information to our office.

- Drop the forms off at the front desk at any VOS office during normal business hours.
- Mail forms to:  
Valley Orthopaedic Specialists  
2 Trap Falls Rd, Suite 404  
Shelton, CT 06484
- Fax: 203.513.3267

***Please note that all forms must be accompanied by a Request for Forms Completion cover sheet. This form must be obtained from our website at [www.vosct.com](http://www.vosct.com) under the Patient Resources tab or at any of our locations.***

### **Q: Is there a fee to have forms completed by the office?**

**A:** Yes, there is a pre-payment fee of \$20 per completed form. Please understand that the completion of the disability/FMLA forms is something above and beyond your medical treatment and is not the responsibility of your insurance company. We are happy to provide mandatory and routine forms such as school and work notes free of charge.

### **Q: If I need another form completed to continue my disability claim, will I have to make another payment?**

**A:** Yes, a pre-payment charge of \$20 is required for each form completed. A new Request for Form Completion coversheet must also accompany each request.

**Q: Where can I make my payment?**

**A:**

- At any VOS location
- By mailing payment to the following address:  
**Valley Orthopaedic Specialists**  
**2 Trap Falls Rd, Suite 404**  
**Shelton, CT 06484**
- By calling our office at **203-734-7900** and paying via debit or credit card over the phone
- Through our website: [www.vosct.com](http://www.vosct.com) by using the “Pay My Bill” button at the top of the page

**Q: What is an acceptable form of payment?**

**A:** We accept Visa, Mastercard, American Express, and Discover credit cards. Additionally, we also accept check (with valid identification), cash and money orders.

**Q: When will I receive my completed forms?**

**A:** Our processing time to complete all forms is 5 business days from the time we receive payment. **Pre-payment is required.**

**Q: How can I help expedite the process?**

**A:** Return the “Request For Form Completion”, Payment and applicable Forms to the office together. Please make sure to fill out the patient information sections in their entirety. The patient’s full name should be on each page. Failure to do so will delay the process.

**Q: Should I sign a Request for Form Completion even if I want my completed forms to be mailed directly to me?**

**A:** Yes, we would like all of our patients to fill out one of these forms. When a disability insurance company calls to verify information over the phone we must first confirm we have signed authorization. If we do not we cannot provide any information over the phone, thus delaying your claim with your disability company.

**Q: Can I provide verbal authorization over the phone?**

**A:** No, it is a VOS policy that we have written consent.

*For any further questions or concerns please contact our office at 203.734.7900 between the hours of 8:00 am and 5:00 pm.*