

FMLA

If you or your spouse plan on using FMLA or Short-Term Disability leave during or after pregnancy or surgery, please turn in the paperwork as soon as you receive it from your employer for timely completion of those forms. It takes 5-7 business days to be completed. Please keep in mind that any corrections that need to be made to paperwork may not be able to be completed on the same day.

Health Mark Group is the third party we use for completion of all these forms.

Contact Info

Phone#: (972) 895-2138

Email: fmla@healthmark-group.com

Hours M-F 8-5PM CST

Any questions that they cannot answer, you can contact our office at (334) 281-1191 and ask to speak with Katie G.

Return to Work Letter

If you need a return-to-work letter from a doctor after surgery or delivery please try to inform the nurse at your Postpartum or Post-Op appointment. Any return dates that change we will be able to update later on if needed.

Thank you!

Dear Patients:

We have contracted with Health Mark Group to assist with the coordination of your FMLA and Short-Term Disability paperwork. It is our goal to maintain excellent patient care in our office, as it is Health Mark's goal to ensure your paperwork is completed as soon as possible. The average turnaround time is 5-7 business days from the time payment is received and they are available Monday – Friday from 8 am – 5 pm to assist you with your FMLA and other benefit forms.

Please provide us your form with the patient information section completed, as well as your day-time contact information and employer's information and fax number (FMLA forms). Also, if you haven't already, you will need to complete a HIPAA authorization form, allowing us to release your information to your employer or benefits provider.

Your doctor's staff, upon receipt, will forward your form to Health Mark Group (MedRelease) who will contact you within 24 hours of receipt. If you are unavailable by phone we will leave a voicemail message and email an invoice. You will submit payment to start the completion of your form. Upon completion and review by your doctor, Health Mark will send a copy to your employer or benefits and provide you a copy. All calls concerning your forms should be sent to Health Mark.

MedRelease/HealthMark Group Form Requirements

Payment: Our representative will contact you for payment (check/credit card/money order)

FMLA Paperwork: \$30.00

Short-Term Disability paperwork: \$35.00

*additional charges could apply for follow up documentation for Short-Term Disability follow ups

Requests for follow-up records: \$5.00

Requests for follow-up forms: \$15.00

Patient Section: Please ensure your "patient section" on your form has been completed before submitting to your doctor.

HIPAA Authorization Form: MedRelease/Healthmark Group can not disclose any information about you until you have authorized it, by submitting a HIPAA authorization form with your required paperwork.

Contact us: Call: 972-895-2138 Email: fmla@healthmark-group.com

Hours M-F 8:00-5:00 CST

Authorization for Release of Medical Record Information

Patient Name: _____ Date of Birth: _____
Phone (H): _____ Phone(C): _____
Address: _____ City/State/Zip: _____

Above listed patient authorizes Montgomery Women's Health and HealthMark Group to make record disclosure regarding current FMLA requests.

This FMLA Paperwork is being completed for: _____
Relationship to Patient: _____

This information may be disclosed and used by the following individual or organization:

Release To: _____ City/State/Zip: _____
Address: _____ Phone: _____
Fax: _____

I have read the above foregoing Authorization for Release of Information and do hereby acknowledge that I am familiar with and fully understand the terms and conditions of this authorization.

X _____ Date: _____

Signature of Patient/Parent/ Guardian or Authorized Representative.