APPENDIX A RELEASE OF INFORMATION FEE SCHEDULE

REQUESTER/PURPOSE F	FEE
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Patient

Continuity of Care (Provider)

Medically Indigent

Fees are waived

Personal Copies- (Paper) \$1.45 per page (pages 1-20)

+\$0.72 per page (21-50) +\$0.29 per page (pages 51+)

+plus actual postage

Continuing Care/Specialties

Continuity of Care (Provider)

Referrals & Other Healthcare Providers

Fees are waived

LEGAL

Depositions (Physicians) \$500 per hour (paid in advance)
Physicians Review with Attorneys \$300 per hour (paid in advance)

Physicians Narrative \$100 per page
Risk Management Fees are waived

WORKERS COMPENSATION

Retrieval and Copy \$2.50 administration fee (0-15 minutes)

+\$2.50 each add 'I 15-minute increment

+\$0.45 per page (9 max) +plus actual postage

DISABILITY ENTITIES & FORM COMPLETION

Family Independence Agency \$15 flat fee
Social Security Disability \$15 flat fee
Long-term and Misc. Disability Forms \$40 flat fee

Life Insurance

THIRD PARTY REQUESTERS (including Attorneys and Insurance Companies)

Copies \$28.92 Initial/Retrieval Fee

+\$1.45 per page (pages 1-20) +\$0.72 per page (pages 21-50) +\$0.29 per page (pages 51+)

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