

What do I need to bring to my First Appointment?

For Social Security Cases

- 1) SS Questionnaire (We can mail or email it to you or it is available on our website for downloading in the client only section);
- 2) Birth certificate, SSN, spouse and children information
- 3) All documentation supporting your disability claim;
- 4) All papers, records and documents that you have received from the Social Security Administration;
- 5) All medical records/reports/bills which you currently have in your possession and the names, addresses and phone numbers of any doctors, hospitals, clinics, therapists or institutions that have treated you and the dates of those treatments;
- 6) all bottles of medication that you are currently taking and a print out of your pharmacy record for prescriptions from the onset of your disability to the present;
- 7) a list of your jobs/employers for the last 15 years;
- 8) last pay stub and tax return
- 9) pay stubs for any work attempts after becoming disabled and proof of payment for any short or long term disability or sick pay or unemployment compensation; and
- 10) any workers' compensation documents, health insurance policies, long-term disability policies or Veterans Administration papers that you have in your possession.

For LTD Cases

- 1) LTD Questionnaire (We can mail or email it to you or it is available on our website for downloading in the client only section);
- 2) All documentation supporting your disability claim;
- 3) Personal Information
 - i) Birth certificate, SSN, passport information, spouse and children information
- 4) Disability Claim Information
 - i) All documents submitted and received in connection with your claim for benefits; All papers, records and documents that you have received from the long term disability insurance carrier, your employer, and the Social Security Administration;
 - ii) A copy of your "claim file"
- 5) Employment Information

- i) Employment history / Resume; a list of your jobs/employers for the last 15 years;
- ii) last pay stub
- iii) pay stubs for any work attempts after becoming disabled and proof of payment for any short or long term disability or sick pay or unemployment compensation; and
- iv) any and all documents reflecting your *job duties* and responsibilities during your employment including your “occupational” or “job” description.
- v) Any and all documents concerning, reflecting or relating to your *job performance* during your employment.
- vi) The name, title and contact information of your supervisors and your direct reports.
- vii) The name, title and contact information of co-workers who have knowledge of your disability, restrictions and limitations.
- viii) The name, title and contact information of co-workers or industry affiliates who perform the same occupation as you with the same job duties and responsibilities.
- ix) Any and all documents concerning, reflecting or relating to your pay and benefits from your employer including pay stubs, sick pay, salary continuation, short term disability payments, employee handbooks, summary plan descriptions, plan documents, enrollment forms, informational sheets, notices, meeting; handouts; and insurance contracts.
- x) All employment information from any work or work attempts since disability onset.
- xi) An analysis if the similarities and differences between your pre-disability occupation and any work performed post disability.

6) Financial Information

- i) Tax Returns from the last five years both personal and business
- ii) Loans; Any debts or delinquencies related to disability
- iii) Bankruptcy Filings
- iv) Any documents evidencing any income received since the onset of your disability.

7) Medical Information –

- i) The names, addresses, phone numbers, dates and types of treatment or consultation or evaluation with any physician, psychiatrist, psychologist, therapist, social worker, nurse, medical technician, medical assistant,

- osteopath, chiropractor, physical therapist, occupational therapist, rehabilitation consultant, or other health care provider or person at a hospital or clinic of any nature whatsoever regarding any sickness or injury whether physical, mental, emotional or otherwise suffer since two years prior to the onset of your disability or earlier if related to your disabling illness or injury.
- ii) All documents reflecting treatment, diagnosis, or consultation or evaluation of any nature whatsoever with a physician, psychiatrist, psychologist, therapist, social worker, nurse, medical technician, medical assistant, osteopath, chiropractor, physical therapist, occupational therapist, rehabilitation consultant, or other health care provider or person at a hospital or clinic of any nature whatsoever regarding any sickness or injury, whether physical, mental, emotional or otherwise suffered since two years prior to the onset of your disability or earlier if related to your disability.
- 8) Vocational Evaluations
- i) All documents reflecting treatment, diagnosis, or consultation of any nature whatsoever with a vocational expert or occupational consultant or other rehabilitation consultant.
- 9) Pharmacy Records
- i) Please obtain printouts of all medications records from all pharmacies utilized since two years prior to the onset of your disability or earlier if medications were prescribed related to your disability through the present.
- 10) Educational Information
- 11) License / Privileges Information
- i) Any Professional or Malpractice Liability Insurance and Renewals – those policies maintained prior to and after disability
 - ii) Any correspondence or documents concerning privileges or rights to engage in or practice your profession.
- 12) Social Security Disability and Retirement Information
- i) Any and all communications to or from the Social Security Administration and / or the State Agency Disability Determination Section
 - ii) Any and all documents concerning receipt of Social Security benefits for you and/or your dependents
- 13) Pension / Retirement Information

- 14) All Workers' Compensation Information and settlements
- 15) Any Other Disability Insurance such as Individual Disability Insurance; Group Short Term Disability (STD); Group Long Term Disability (LTD); Social Security Disability; State Disability Insurance; Workers' Compensation; Veteran's Benefits (VA); Credit Card Disability; Credit Union Disability; Auto Disability; Mortgage Disability; Life Insurance Disability Rider; Key Man Insurance; Overhead Expense Insurance; And Pension Disability and ALL related documentation.
- 16) Any life insurance policies containing waivers of premiums provisions in the event of disability.
- 17) Journals, notes, calendars, diaries:
 - i) All such items that you have kept related your employment or your disability or your medical treatment or your claim for benefits.
- 18) Travel Documentation
 - i) Your frequent flyer account statements,
 - ii) airline travel records
 - iii) auto rental information
 - iv) auto mileage records
 - v) a copy of your passport pages if your occupation involves frequent international travel or if you have travel internationally since your disability onset date.
- 19) Any settlement documents or releases or offers provided to you or executed by you related to your employment, or employment termination, or severance, or job modification or sale of business or disability, or employee benefits or medical treatment or your claim for disability benefits.
- 20) Sale of Business or Business Interest or Hiring of persons to perform your job duties or occupation in your absence – All documents
- 21) Overhead Expenses
 - i) If your claim involves and overhead expense policies – all business expenses incurred
- 22) Any lawsuits or legal actions to which you have been a party.
- 23) Any deposition or other testimony you have provided under oath.
- 24) Legal Charges or Convictions- all documents.
- 25) All documents concerning any legal consultations or representation you have had in connection with your disability claim.
- 26) All documents concerning any experts consulted in connection with your disability claim or sickness or injury.

- 27) All documents, declarations, letters, witness statements executed by and third parties that have knowledge of your employment, disability, or medical condition or claim.
- 28) Any and all documents you contend support your claim and the benefits and damages you seek to recover.

For Physician Clients – Please pay special attention to the following information:

- Your Medical Practice – any literature detailing your practice or medical specialties
- The medical equipment and tools utilized in your particular clinical practice and specialty
- Any and all procedure productivity reports
- Any and all billing information including CPT code reports and billing systems utilized in your practice
- All passive and active income from your practice and ownership interests
- Any changes in income pre and post disability and the trend in the years immediately prior to disability
- License / Privileges Information
- Any Professional or Malpractice Liability Insurance and Renewals – those policies maintained prior to and after disability
- Any correspondence or documents concerning privileges or rights to engage in or practice your profession including documents or letter to any hospitals, clinics, practices or similar facilities or entities concerning privileges and positions and practice.
- Your calendar, appointment book and scheduling system.

For Attorney Clients – Please pay special attention to the following information:

- Your Law Practice – any literature detailing your practice or legal specialties
- If your practice area is litigation or trial practice, please be prepared to assist us in evaluating information on actual trial or potential trial or court room work undertaken verse other legal work.
- Any and all procedure productivity / billing reports
- Any and all billing information including reports and billing systems utilized in your practice

- All passive and active income from your practice and ownership interests
- Any changes in income pre and post disability and the trend in the years immediately prior to disability
- License / Privileges Information
- Any Professional or Malpractice Liability Insurance and Renewals – those policies maintained prior to and after disability
- Any correspondence or documents concerning privileges or rights to engage in or practice your profession including documents or letter to any state bar or court or similar entities concerning privileges and positions and practice.
- Your calendar, appointment book and scheduling system.

For Our Business Executive Clients – Please pay special attention to the following information:

- Your calendar, appointment book and scheduling system.
- To the extent that you contend that your occupation involved frequent travel via car or air in state, out of state, or international – please provide us information concerning your travel accounts, frequent flier programs, frequent car rental programs, mileage statements, credit card billings, passport information to assist us in creating an accurate pre and post disability travel profile

Is the appointment free?

The initial 15 minute consultation is free. We offer both hourly and contingency representation. With contingency representation, there is no fee unless you recover.

Do you offer after hours/evenings/weekend appointments?

Yes, if we determine they are necessary; but we find we are able to accommodate most clients with phone or internet video appointments during normal business hours.

There is a link for downloading the video chat on our webpage.