

Claimant:	Employer:	
Date of Birth:	Employer Address:	
SSN:	Insurer/TPA:	
Date of Loss:	Insurer/TPA Address:	
Jurisdiction:	Adjuster:	
Claimant Address:	Adjuster Email: Phone:	
Claimant Attorney:	Defense Attorney:	
Attorney Address:	Def Attorney Address:	
Attorney Phone:	Def Attorney Phone:	
WC #:	Estimated Settlement:	
Claim #:	Please Check Requested Services:	<input type="checkbox"/> WorkComp MSA <input type="checkbox"/> Liability MSA <input type="checkbox"/> Social Security Verification <input type="checkbox"/> Cond. Payment Resolution <input type="checkbox"/> Structured Settlement Quote <input type="checkbox"/> Other
Accepted Body Parts:		
Disputed Body Parts:	Special Handling Instructions:	

Required Documents:

- **For an MSA**, we will need the **last 2 years of medical records demonstrating active treatment along with a medical and prescription payment history**. If you have any additional helpful records (IME, AME, UR, IMR, Court Orders, Applicable State Statutes, Hospital Discharge Records) please include those as well.
- **For a Social Security Benefit Verification**, we will need the proper release form signed. This release can be downloaded [here](#).
- **For Conditional Payment Resolution**, we will need a signed letter of authorization, and a completed referral.

Please send documents to either address: **MEDVAL, 23046 Avenida De La Carlota, Suite 270, Laguna Hills, CA 92653; or MEDVAL, 9256 Bendix Road, Suite 304, Columbia, MD 21045.**

Alternatively, records can be sent securely through our online referral: <https://www.medval.com/online-referral/> or files may be emailed to onlinereferral@medval.com.

The standard turnaround time is 14 business days. Please advise if an MSA report is needed sooner for a Settlement Conference or a Hearing.

All MSA reports come with a Rated Age and Annuity Quote. MEDVAL can also provide Indemnity Quotes and Professional Administration. Please call 888-SetAside or email info@medval.com for more information.

Referred By (Adjuster): _____ Referral Approved By (Manager): _____