

Mississippi Workers' Compensation Medical Fee Schedule, Dispute Resolution Rules II. (Text of the rule if the proposed amended language is adopted)

II. FORMS AND DOCUMENTATION

A. Valid requests for resolution of a dispute must be submitted on the "Request for Resolution of Dispute" form (in the Forms section) along with the following:

1. Copies of the original and resubmitted bills in dispute that include dates of service, procedure codes, charges for services rendered and any payment received, and an explanation of any unusual services or circumstances;
2. EOR including the specific reimbursement;
3. Supporting documentation and correspondence;
4. Specific information regarding contact with the payer; and
5. Any other information deemed relevant by the applicant for dispute resolution.

B. A request for Resolution of Dispute must be submitted to:

Mississippi Workers' Compensation Commission
Cost Containment Division
1428 Lakeland Drive
P.O. Box 5300
Jackson, MS 39296-5300

C. A party, whether payer, provider, patient, or any representative of such parties, shall certify that a copy of the Request for Resolution of Dispute, and any supporting documentation, being filed with the Commission has been provided to the other interested parties or their representatives by personal delivery, United States Mail, facsimile or other electronic submission guaranteed to accomplish receipt, simultaneously with the filing to the Commission. This requirement shall also apply when a party files a request seeking review of a dispute by the Commission.

Effective on and after August 1, 2011.

Mississippi Workers' Compensation Commission Procedural Rule 20 (Text of the rule if the proposed amended language is adopted)

PROCEDURAL RULE 20. FILING OF PLEADINGS AND OTHER DOCUMENTS.

Except for the claimant's petition to controvert (in triplicate); proposed order for approval of settlement (original and three copies); and briefs to the Full Commission (original and two copies); only one copy of a pleading or other document is required to be filed at the Commission. Once a case is controverted, each party shall certify that he or she has sent a copy of the pleading or other document to each other party to the case.

Any document or pleading prepared by an attorney for a party shall contain the typed or printed name, official Mississippi Bar identification number, address, telephone number, facsimile number, and email address of the attorney. All pleadings and other documents filed with the Commission, including any stenographically reported depositions, shall be typed or printed on letter size (8-1/2" x 11") paper to conform with the Mississippi Rules of Civil Procedure and the Mississippi Rules of Appellate Procedure and shall contain the style of the case and Commission file number.

Any proposed order submitted to the Commission or Administrative Judge shall be signed by the party preparing the order, and where the proposed order is an agreed or joint order, such as an order approving settlement, it must be signed and approved by an attorney or other legal representative for each party.

This rule shall be in force and effect on and after August 1, 2011.

Mississippi Workers' Compensation Commission Procedural Rule 21 (Text of the rule if the proposed amended language is adopted)

PROCEDURAL RULE 21. ADDRESS AND PHONE OF PARTIES.

Every party to a controverted or non-controverted case must keep the Commission informed of their current address and telephone number. Attorneys representing a party in any such case shall also keep the Commission informed of their current address, telephone number, facsimile number, and email address. The most recent contact information on file with the Commission shall be presumed correct unless the Commission is notified otherwise in writing.

This Rule shall be in force and effect on and after August 1, 2011.

Mississippi Workers' Compensation Commission General Rule 7(B)(10)(a)
(Text of the rule if the proposed amended language is adopted)

(10) Payment of Premium.

- a. Each group self-insurer shall establish to the satisfaction of the Commission a premium payment plan which shall include either (1) an annual payment by each member of at least 25% of that member's annual premium before the start of the group self-insurer's fund year and (2) payment of the balance of each member's annual premium in monthly or quarterly installments. Alternatively, a payment plan may allow any member(s) to make an initial deposit payment equal to 10% of that member's then annual premium, which 10% deposit payment shall be held by the group self insurer as a permanent deposit. The member's entire annual premium, exclusive of the 10% deposit, may be paid annually, or in monthly or quarterly installments.

This Rule shall be in force and effect on and after August 1, 2011.

Mississippi Workers' Compensation Medical Fee Schedule, Dispute Resolution Rules II. (Variance)

II. FORMS AND DOCUMENTATION

A. Valid requests for resolution of a dispute must be submitted on the "Request for Resolution of Dispute" form (in the Forms section) along with the following:

1. Copies of the original and resubmitted bills in dispute that include dates of service, procedure codes, charges for services rendered and any payment received, and an explanation of any unusual services or circumstances;
2. EOR including the specific reimbursement;
3. Supporting documentation and correspondence;
4. Specific information regarding contact with the payer; and
5. Any other information deemed relevant by the applicant for dispute resolution.

B. A request for Resolution of Dispute must be submitted to:

Mississippi Workers' Compensation Commission
Cost Containment Division
1428 Lakeland Drive
P.O. Box 5300
Jackson, MS 39296-5300

C. A party, whether payer, provider, patient, or any representative of such parties, shall certify that a copy of the Request for Resolution of Dispute, and any supporting documentation, being filed with the Commission has been provided to the other interested parties or their representatives by personal delivery, United States Mail, facsimile or other electronic submission guaranteed to accomplish receipt, simultaneously with the filing to the Commission. This requirement shall also apply when a party files a request seeking review of a dispute by the Commission.

Effective on and after August 1, 2011.

Mississippi Workers' Compensation Commission Procedural Rule 20 (Variance)

PROCEDURAL RULE 20. FILING OF PLEADINGS AND OTHER DOCUMENTS.

Except for the claimant's petition to controvert (in triplicate); proposed order for approval of settlement (original and three copies); and briefs to the Full Commission (original and two copies); only one copy of a pleading or other document is required to be filed at the Commission. Once a case is controverted, each party shall certify that he or she has sent a copy of the pleading or other document to each other party to the case.

Any document or pleading prepared by an attorney for a party shall contain the typed or printed name, official Mississippi Bar identification number, ~~and~~ address, ~~and~~ telephone number, facsimile number, and email address of the attorney. All pleadings and other documents filed with the Commission, including any stenographically reported depositions, shall be typed or printed on letter size (8-1/2" x 11") paper to conform with the Mississippi Rules of Civil Procedure and the Mississippi Rules of Appellate Procedure and shall contain the style of the case and Commission file number.

Any proposed order submitted to the Commission or Administrative Judge shall be signed by the party preparing the order, and where the proposed order is an agreed or joint order, such as an order approving settlement, it must be signed and approved by an attorney or other legal representative for each party.

This rule shall be in force and effect on and after ~~April~~ August 1, 2001 ~~2011~~.

Mississippi Workers' Compensation Commission Procedural Rule 21 (Variance)

PROCEDURAL RULE 21. ADDRESS AND PHONE OF PARTIES.

Every party to a controverted or non-controverted case must keep the Commission informed of ~~that party's~~ their current address and telephone number. Attorneys representing a party in any such case shall also keep the Commission informed of their current address, telephone number, facsimile number, and email address. The most recent contact information ~~last address and telephone number~~ on file with the Commission shall be presumed correct unless the Commission is notified otherwise in writing.

This Rule shall be in force and effect on and after ~~September 1, 1993~~ August 1, 2011.

**Mississippi Workers' Compensation Commission General Rule 7(B)(10)(a)
(Variance)**

(10) Payment of Premium.

- b. Each group self-insurer shall establish to the satisfaction of the Commission a premium payment plan which shall include either (1) an annual payment by each member of at least 25% of that member's annual premium before the start of the group self-insurer's fund year and (2) payment of the balance of each member's annual premium in monthly or quarterly installments. Alternatively, a payment plan may allow any member(s) to make an initial deposit payment equal to 10% of that member's then annual premium, which 10% deposit payment shall be held by the group self insurer as a permanent deposit. The member's entire annual premium, exclusive of the 10% deposit, may be paid annually, or in monthly or quarterly installments.

This Rule shall be in force and effect on and after August 1, 2011.