

**Department of State
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Sequence Number: 12-21-20
Notice ID(s): 3225
File Date: 12/21/2020

Notice of Rulemaking Hearing

Hearings will be conducted in the manner prescribed by the Uniform Administrative Procedures Act, T.C.A. § 4-5-204. For questions and copies of the notice, contact the person listed below.

Agency/Board/Commission:	Department of Labor and Workforce Development
Division:	Bureau of Workers' Compensation
Contact Person:	Troy Haley
Address:	220 French Landing Dr. 1-B, Nashville, TN 37243
Phone:	615-532-0179
Email:	troy.haley@tn.gov

Any Individuals with disabilities who wish to participate in these proceedings (to review these filings) and may require aid to facilitate such participation should contact the following at least 10 days prior to the hearing:

ADA Contact:	Troy Haley
Address:	220 French Landing Dr. 1-B, Nashville, TN 37243
Phone:	615-532-0179
Email:	troy.haley@tn.gov

Hearing Location(s) (for additional locations, copy and paste table)

Address 1:	Tennessee Room		
Address 2:	220 French Landing Dr. 1-A		
City:	Nashville, TN		
Zip:	37243		
Hearing Date:	02/19/2021		
Hearing Time:	10:00 am	<input checked="" type="checkbox"/> X CST/CDT	<input type="checkbox"/> EST/EDT

Additional Hearing Information:

If attending in-person, please bring identification so that you may be checked into the building.

COVID Building Entry Protocols:

As part of the Tennessee Pledge, the Bureau of Workers' Compensation observes and is compliant with the following building entry protocols:

- At this time, all persons working or meeting in the 220 French Landing building are required to wear a face mask.
- Additional personal protection equipment (PPE) such as a face shield are permitted but are not a replacement for a face mask.
- Upon entry, persons are required to complete a health screening by answering the following questions:

1. Have you been in close contact with a confirmed case of COVID-19 in the past 14 days? (Note: This does not apply to medical personnel, first responders, or other individuals who encounter COVID-19 as part of their professional or caregiving duties while wearing appropriate PPE.)
2. Are you experiencing a cough, shortness of breath or sore throat?

3. Have you had a fever in the last 48 hours?

4. Have you had new loss of taste or smell?

5. Have you had vomiting or diarrhea in the last 24 hours?

• Persons working or meeting in the 220 French Landing building are also required to submit to a temperature screening; persons with temperatures 100.4 degrees or higher will not be permitted to enter the building. However, an opportunity will be provided to submit comments in writing instead of in-person.

*****NOTICE*****

Currently, Governor Lee's Emergency Order pertaining to COVID-19 that allows State Boards to hold their meetings electronically is set to expire December 27, 2020. If it does expire on that date, then this hearing will be an in-person hearing at the location and time denoted just above. If the Emergency Order is extended beyond the scheduled date of this hearing, then this hearing will be held electronically via Webex.

In the event of an electronic hearing, members of the public may join the Webex at the following link:

<https://tngov.webex.com/tngov/j.php?MTID=m4c5efc885e8e4d9182d287a51cdab761>

Meeting Number (Access Code): 178 103 0732

Meeting password: workerscomp

It is recommended that interested persons join the Webex several minutes early to ensure adequate time to install any mandatory plugins in order to attend the electronic rulemaking hearing.

Written comments will be accepted until March 5, 2021 and can be sent to troy.haley@tn.gov.

Revision Type (check all that apply):

- Amendment
 New
 Repeal

Rule(s) (ALL chapters and rules contained in filing must be listed. If needed, copy and paste additional tables to accommodate more than one chapter. Please enter only **ONE** Rule Number/Rule Title per row.)

Chapter Number	Chapter Title
0800-02-26	Electronic Medical Billing for Workers' Compensation
Rule Number	Rule Title
0800-02-26-.03	Formats for Electronic Medical Bill Processing
0800-02-26-.05	Electronic Medical Billing, Reimbursement, and Documentation
0800-02-26-.06	Employer, Insurance Carrier, Managed Care Organization, or Agents' Receipt of Medical Bills from Health Care Providers

Place substance of rules and other info here. Statutory authority must be given for each rule change. For information on formatting rules go to

<https://sos.tn.gov/products/division-publications/rulemaking-guidelines>.

Chapter 0800-02-26-.03 is amended by deleting the prior Rule 0800-02-26-.03(1)(a)2. and replacing it with the following language, so that as amended the rule shall read:

2. Institutional/Hospital Billing – the ASC X12 Standards for Electronic Data Interchange Technical Report Type 3, Health Care Claim: Institutional (837), May 2006, ASC X12N/005010X223, Type 1 Errata to Health Care Claim: Institutional (837), ASC X12 Standards for Electronic Data Interchange Technical

Report Type 3, October 2007, ASC X12N/005010X223A1, and Type 3 Errata to Health Care Claim: Institutional (837), June 2010, ASC X12, 005010X223A2.

Authority: T.C.A. § 50-6-202

Chapter 0800-02-26-.05(6)(d) is amended by deleting the word “before” and replacing it with the word “within”.

Authority: T.C.A. § 50-6-202

Chapter 0800-02-26-.06 is amended by deleting the prior Rule 0800-02-26-.06(8) and replacing it with the following language, so that as amended the rule shall read:

- (8) Payment of all uncontested portions of a complete medical bill shall be made to the provider within 15 calendar days of receipt of the original bill, or receipt of additional information requested by the payer allowed under the law. Any provider not receiving timely payment of the undisputed portion of the provider’s bill may institute a collection action in a state court having proper jurisdiction over such matters to obtain payment of the bill. Such providers, if they prevail, shall also be entitled to receive reasonable costs and attorney fees incurred in such collection actions to be paid by the employer.

Authority: T.C.A. § 50-6-202

I certify that the information included in this filing is an accurate and complete representation of the intent and scope of rulemaking proposed by the agency.

Date: 11/30/2020

Signature: 

Name of Officer: Abbie Hudgens

Title of Officer: Administrator

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Filed with the Department of State on: 12/21/2020


Tre Hargett
Secretary of State

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