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Sequence Number: 03-46-10
 Notice ID(s): 1240
 File Date: 03/30/2010

Notice of Rulemaking Hearing

Hearings will be conducted in the manner prescribed by the Uniform Administrative Procedures Act, Tennessee Code Annotated, Section 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:	Workers' Compensation
Contact Person:	Landon Lackey
Address:	220 French Landing Drive Nashville, TN 37243
Phone:	615-532-0370
Email:	landon.lackey@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:	Evelyn Gaines-Guzman
Address:	220 French Landing Drive Nashville, TN 37243
Phone:	615-253-1331
Email:	evelyn.gaines.guzman@tn.gov

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

Address 1:	TN Department of Labor and Workforce Development 220 French Landing Drive Tennessee Room, 1 st Floor, Side A		
Address 2:			
City:	Nashville		
Zip:	37243		
Hearing Date :	06/11/2010		
Hearing Time:	10:00 a.m.	<input checked="" type="checkbox"/> CST	<input type="checkbox"/> EST

Additional Hearing Information:

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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
0800-02-18	Medical Fee Schedule

Rule Number	Rule Title
0800-02-18-.02	General Information and Instructions for Use

(Place substance of rules and other info here. Statutory authority must be given for each rule change. For information on formatting rules go to <http://state.tn.us/sos/rules/1360/1360.htm>)

Chapter 0800-02-18
Medical Fee Schedule

Amendments

Rule 0800-02-18-.02, General Information and Instructions for Use, paragraph (4)(b) is amended by deleting the current language in its entirety and replacing it with the following:

- (b) The appropriate conversion factor must be determined by the type of CPT code for the procedure performed in all cases. For procedures performed on or after January 1, 2011, all surgical CPT codes shall be reimbursed at the rate previously designated as the board-eligible and certified orthopedic and neurosurgery rate. Such rate shall apply regardless of the treating physician's specialty or certification status.

Authority: T.C.A. §§ 50-6-204, 50-6-205 and 50-6-233 (Repl. 2005).

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: 29 Mar 10

Signature: James Neeley

Name of Officer: James G. Neeley

Title of Officer: Commissioner of Labor and Workforce Development



Subscribed and sworn to before me on: March 29, 2010

Notary Public Signature: Vickie H. Gregory

My commission expires on: December 31, 2012

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Filed with the Department of State on: 3/30/10

Tre Hargett

Tre Hargett
Secretary of State

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