Mississippi Secretary of State
125 South Congress St., P. O. Box 136, Jackson, MS 39205-0136

ADMINISTRATIVE PROCEDURES NOTICE FILING

AGENCY NAME	CONTACT PERSON	TELEPHONE NUMBER	
Mississippi Workers' Compensation Commission	Jeff Skelton	601-987-4265	
ADDRESS	CITY	STATE	ZIP
1428 Lakeland Drive, P.O. Box 5300	Jackson	MS	39296 -5300
EMAIL	SUBMIT DATE	Name or number of rule(s):	
jskelton@mwcc.ms.gov	08/19/22	Mississippi Workers' Compensation Medical Fee Schedule	

Short explanation of rule/amendment/repeal and reason(s) for proposing rule/amendment/repeal: The entire Mississippi Workers' Compensation Fee Schedule is reviewed and updated every three years. The last comprehensive review and update was done in 2019. This is the 2022 update.
Specific legal authority authorizing the promulgation of rule: Miss. Code. Ann. §71-3-15(3).
List all rules repealed, amended, or suspended by proposed rule: The entire Fee Schedule was reviewed and updated, and multiple rules were amended. The attached redlined copy of the Fee Schedule shows every change.

ORAL PROCEEDING:

An oral proceeding is scheduled for this rule on Date: September 14, 2022 Time: 10:00 a.m. Place: Mississippi Workers' Compensation Commission, 1428 Lakeland Drive, Jackson, MS 39216

_____Presently, an oral proceeding is not scheduled on this rule.

If an oral proceeding is not scheduled, an oral proceeding must be held if a written request for an oral proceeding is submitted by a political subdivision, an agency or ten (10) or more persons. The written request should be submitted to the agency contact person at the above address within twenty (20) days after the filing of this notice of proposed rule adoption and should include the name, address, email address, and telephone number of the person(s) making the request; and, if you are an agent or attorney, the name, address, email address, and telephone number of the party or parties you represent. At any time within the twenty-five (25) day public comment period, written submissions including arguments, data, and views on the proposed rule/amendment/repeal may be submitted to the filing agency.

ECONOMIC IMPACT STATEMENT:

☒ Economic impact statement not required for this rule. ☐ Concise summary of economic impact statement attached.

TEMPORARY RULES

_____ Original filing
_____ Renewal of effectiveness
To be in effect in _____ days
Effective date:
_____ Immediately upon filing
_____ Other (specify): _____

PROPOSED ACTION ON RULES

Action proposed:
_____ New rule(s)
__XX__ Amendment to existing rule(s)
_____ Repeal of existing rule(s)
_____ Adoption by reference
Proposed final effective date:
_____ 30 days after filing
__XX__ Other (specify): October 15, 2022

FINAL ACTION ON RULES

Date Proposed Rule Filed: _____
Action taken:
_____ Adopted with no changes in text
_____ Adopted with changes
_____ Adopted by reference
_____ Withdrawn
_____ Repeal adopted as proposed
Effective date:
_____days after filing
_____ Other (specify): _____

Printed name and Title of person authorized to file rules: Jeff Skelton, Senior Attorney
Signature of person authorized to file rules: Jeff Skelton

OFFICIAL FILING STAMP

Accepted for filing by

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FILED
AUG 19 2022
MISSISSIPPI
SECRETARY OF STATE

Accepted for filing by dlw542 POM

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The entire text of the Proposed Rule including the text of any rule being amended or changed is attached.