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NAC 616C.274 Form for requesting hearing before hearing officer or for notice of appeal; information required to be provided by insurer or third-party administrator.

1. A request for a hearing before a hearing officer or a notice of appeal filed with the hearings division of the department of administration must be filed:

(a) On a form provided by an insurer, an organization for managed care or the hearings division; or

(b) On a similar form approved by the department of administration.

2. An insurer or the third-party administrator for an insurer shall provide the following information on each form used to request a hearing:

(a) The name and last known mailing address of the claimant;

(b) The name under which the employer was doing business at the time of the injury and the last known mailing address and telephone number of the employer;

(c) If the insurer is a self-insured employer:

(1) The name, address and telephone number of the self-insured employer; and

(2) The name, address and telephone number of the third-party administrator of the self-insured employer, if any;

(d) The number of the claim;

(e) The date of injury; and

(f) If the request is for a hearing before a hearing officer, a copy of the letter of determination of the insurer or, if such a copy is unavailable, the date of the determination of the insurer and the issues stated in the determination.

(Added to NAC by Hearings Div., eff. 5-23-96)