Cost Contaiment Solutions, LLC



Fax Request to: 800-867-1522 **RUSH □**

EMAIL: [IR@CostContainmentSolutions.com](mailto:IR@CostContainmentSolutions.com)

Call CCS @ 1 866-236-4910 Ext. 712 Referral:

Impairment Solutions IR review □ MIRRP □ Utilization review □

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Requesting Party Information | | | | | | | | | | |  | | Claimant Information | | | |
| **Name:** | |  | | | | | | | | |  | | **Name:** |  | | |
| **Company:** | |  | | | | | | | | |  | | **Address:** |  | | |
| **Address:** | |  | | | | | | | | |  | |  | | |
|  | | | | | | | | |  | | **City:** |  | | |
| **City:** | |  | | | | | | | | |  | | **State:** |  | | **Zip:** |
| **State:** | |  | | | | | | **Zip:** | | |  | | **DOI:** |  | | |
| **Phone:** | |  | | | | | | | **Ext:** | |  | | **DOB:** |  | | |
| **Fax:** | |  | | | | | | | | |  | | **Claim #:** |  | | |
| **Email:** | |  | | | | | | | | |
|  | |  | | | | | | | | |
| Bill to same as above: | | | | | | | Yes \_\_\_\_\_ N0\_\_\_\_ | | |  | | ***Required For TN Disability Rating*** | | | | |
| Other address: | | | |  | | | | | |  | | **Employer:** | | |  | |
|  | | | | | |  | | **AWW:** | | |  | |
| Dr Name on report: | | | | | |  | | | |  | | **Occupation:** | | |  | |
|  | | | |  | | **Job Function:** | | |  | |
| Send copy to: | | |  | | | | | | | **No of employees:** | | |  | |
| Attorney Name: | | | | |  | | | | |  | |
| Email: |  | | | | | | | | |

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| Comments**:** |
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[www.CostContainmentSolutions.com](mailto:www.CostContainmentSolutions.com) • email: [IR@CostContainmentSolutions.com](mailto:IR@CostContainmentSolutions.com) • Phone (866) 236-4910 Ext 712 • Fax: (800) 867-1522

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**How to Send a Referral To**

**Cost Containment Solutions, LLC**

* A referral form will be sent to your email. Keep a blank copy on your desk top and send a copy with the claimants’ information and medicals to [IR@CostContainmentSolutions.com](mailto:IR@CostContainmentSolutions.com%20) or via fax at 1 800-867-1522.
* If you do not have a referral form, call the office at 1-866-236-4910 ext. 712 and one will be sent to you via email or fax.
* Make sure that all of the information that is relevant is completed on the form, if possible typed.
* Send the most recent medical report that contains the Impairment Rating, Disability Rating or P&S report (depending on the state and term that is used) If there is more than one specialty, no problem, send them all over and CCS will sort through it.
* If there are other clinical reports that have been used to determine the Impairment Rating such as an MRI report or x ray we may ask for those as well.
* Indicate the version of the AMA Guides that you want reviewed and if there are any special circumstances. (if you are not sure, CCS can determine it)
* If the file is over 200 pages, CCS has an FTP site to upload a large file. Simply call CCS and we will help you.
* If this is a RUSH case, please indicate and know that there will be an extra fee.

The case will be assigned to a doctor to review and you will get an answer back within 72 hours or less. You will have access to the doctor who did the review and in most cases that is free of charge.

Please indicate whether you have a central scanning center for CCS to return the report and the invoice.

Multi-trauma, psyche cardio, respiratory etc will take longer and may cost more.

In CA we offer the PD rating for indemnity purposes but need all of the wage etc. information filled in.

In TX and NV we calculate the payout as well, as long as we get the wage information.

Cost Containment Solutions, LLC • PO Box 290607 • Nashville, TN

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