

INFORMATION ON FILING A NEW WORKERS' COMPENSATION CLAIM

1. Complete the Employer's Report of Occupational Injury From, LIBC 344 in its entirety. It is very important that you fill out all the information when submitting the form. Please include the start time, time of injury, date disability began, return to work date, social security number and all other information. We cannot enter it into our system unless we have all the information. Once completed, please email the completed form to WC-Claims@mrctrust.com. All claims, even if the employee did not seek treatment must be reported to MRM Trust within 24 hours. Notification only claims may turn into a medical only claim if the employee starts to have symptoms weeks or months later. Please note that reporting notification only claims does not affect your Workers' Comp rate.
2. All claims information, such as Employer's Reports, Police Reports, Medical Reports, work status slips must be timely emailed or faxed to the MRM Trust office listed above.
3. If the employee needs to seek treatment immediately, they are to tell the treating provider that it is a WC Claim, they can use MRM followed by the last four digits of their social security number as the claim number. Once we receive the claim, we will enter it in our system within 24 hours and email you the claim number and adjuster information.
4. To expedite the processing of all claims related medical bills, please mail the bills directly to MRM Trust, PO Box 1275, Canonsburg, PA 15317. Please provide this information to all treating medical providers.
5. Provide the injured employee with the AWPRx information which is the prescription program provided to injured employees under MRM workers' compensation. They will receive the prescription card via text message. If they prefer a card be mailed to them, please let the adjuster know.
6. If you have a panel of physicians, the injured employee is required to treat with a panel physician for the first 90 days of treatment. After the 90 days expires, he/she can treat with any physician of their choice. If you do not have a panel and would like to put one in place, Reli can assist with compiling a Panel. Please contact one of the adjusters listed below and they will assist you with contacting Reli to help guide you in putting the panel together.

7. Workers' comp is based on a seven (7) day work week regardless of if you work seven days or not. Wage loss benefits start with the eighth day off. If the injured worker is off fourteen (14) days or more, wage loss benefits are retroactive to day one.
8. Wage information will be requested for loss time claims. Wages requested will include all wages paid one year prior to the date of injury. An adjuster will send you the form to fill out and return to us. Any medical reports and/or work status slips received for the injury should be faxed to the Trust's office upon receipt (fax 724-934-1609).
9. It is very important to notify the adjusters of the date that an injured worker returns to work so that the appropriate documentation is forwarded to the Bureau of Workers' Comp to stop benefit checks. We have seven (7) days from the "Return to Work" date to file the Notification of Suspension with the Bureau, which is a unilateral document that does not require the claimant's signature. We will file the documents with the Bureau on your behalf.

MRM Trust Workers' Comp Claim Adjusters

Donna Cox-Bird – 724-934-1597

Meghan Graham – 724 934-1598

Rochelle Johnson – 724 934-1596

MRM Trust Workers' Comp Email

WC-Claims@mrmtrust.com

MRM Trust Claims Fax

724-934-1609

Medical Bills to be sent to:

MRM Trust

PO Box 1275

Canonsburg, PA 15317

FAX: 724-745-6960