BEFORE THE IOWA WORKERS' COMPENSATION COMMISSIONER

JAMES MADDEN, Claimant, vs. ROCK INDUSTRIES, INC., Employer, and FEDERATED, Insurance Carrier, Defendants.	:	File No. 5068785 A R B I T R A T I O N D E C I S I O N Head Note Nos.: 1402.30, 1801, 1803, 2401, 2402, 2501, 2502

STATEMENT OF THE CASE

Claimant, James Madden, filed a petition in arbitration seeking workers' compensation benefits from Rock Industries, Inc., employer and Federated, insurance carrier, both as defendants. This matter was heard on April 28, 2020 with a final submission date of July 1, 2020.

The record in this case consists of Joint Exhibits 1-10, Claimant's Exhibits 1-7, Defendants' Exhibits A-E, and the testimony of claimant and Loy Van't Hul.

Claimant filed joint exhibits in this case. Claimant forgot to file Joint Exhibit 1, page 1. Joint Exhibit, page 1 was later made a part of the record upon motion by defendants, and is found in defendants' motion dated June 22, 2020. The order and numbering of the joint exhibits and claimant's exhibits is confusing and difficult to follow, but appear to track the index as shown in Claimant's Post-Hearing Brief, page 3.

The parties filed a hearing report at the commencement of the arbitration hearing. On the hearing report, the parties entered into various stipulations. All of those stipulations were accepted and are hereby incorporated into this arbitration decision and no factual or legal issues relative to the parties' stipulations will be raised or discussed in this decision. The parties are now bound by their stipulations.

ISSUES

Whether claimant sustained an injury that arose out of and in the course of employment.

Whether claimant's claim for benefits is barred by application of Iowa Code section 85.26.

Whether claimant's claim for benefits is barred by application of Iowa Code section 85.23.

Whether claimant's injury resulted in a temporary disability.

Whether claimant's injury resulted in a permanent disability.

Whether there is a causal connection between the injury and the claimed medical expenses.

Whether claimant is entitled to reimbursement for an independent medical evaluation (IME).

FINDINGS OF FACT

Claimant was 66 years old at the time of hearing. Claimant has a GED.

Claimant worked at IBP for approximately ten years performing various jobs on a production line.

Claimant began working for Rock Industries in 2004. Rock Industries does heat testing and machinery of parts. Claimant worked as a C&C machinist for Rock Industries. Claimant said a C&C machinist makes parts by drilling holes and cutting slots in the parts.

Claimant testified he worked at a number of machines for Rock Industries. Claimant said his work required he extended his arms and work away from his body. Claimant said some machines required him to work overhead.

Loy Van't Hul testified he is the plant manager at Rock Industries. Mr. Hul testified that claimant was a utility worker and would fill in at different machines when needed.

Claimant's prior medical history is relevant. Claimant testified he had intermittent lower back pain since he was 15 years old. (JE5, page 98; Transcript p. 2) In 2010 and 2011 claimant had approximately 8 chiropractic treatments for his back and neck. (JE2, pp. 10-17)

On January 23, 2012, claimant completed a report of injury with Rock Industries regarding his fingers and hands. Claimant noted on the form "was told this can cause elbow, shoulder, neck pain also." (Ex. B, p. 5)

In 2012, claimant had chiropractic treatments for his back on approximately three occasions. (JE2, pp. 18-12)

In 2013, claimant had chiropractic treatments for his neck and back on approximately seven occasions. (JE2, pp. 22-29)

In 2014, claimant had chiropractic treatments for his back and neck on approximately eight occasions. (JE2, pp. 30-40)

In 2015, claimant had chiropractic treatments for his neck and back on approximately 15 occasions. (JE2, pp. 41-55)

On November 6, 2015, claimant treated with Michelle Johnson, M.D., at the Sanford Canton Inwood Clinic for right shoulder and neck pain. Claimant had pain for the past two weeks. Dr. Johnson indicated claimant's pain was ". . . likely due to overuse at work." (JE1, p. 1) Claimant testified Dr. Johnson told him his overuse at work was also the cause of his neck and shoulder pain. (Tr. p. 43)

In 2016 and 2017, claimant had chiropractic treatments for his neck and back approximately 30 times. (JE2, pp. 57-86)

Claimant testified he has a cardiac condition. He said he had nine heart stents put in. Claimant said he recently had the stents tested and found that only one of the cardio stents was open. (Tr. p. 35)

On November 13, 2017, claimant was evaluated at Sanford Canton for right shoulder pain worsening over the past five months. X-rays showed degenerative changes. Claimant was given a return to work slip for November 14, 2017. (JE7, pp. 109-120)

Claimant testified at hearing that on November 13, 2017, he told Mr. Hul his right shoulder hurt and his doctor told him it was because of his work. Mr. Hul testified he turned the claim of the work injury over to the insurer. (Tr. pp. 98-99)

Claimant testified that when he attempted to give his employer notice of his work injury, they ignored him. Claimant said his employer told him the shoulder injury was not defendants' fault but was because claimant was 64 years old. Claimant said he eventually filled out his own first report of injury. (Tr. p. 44; Ex. 1)

On December 11, 2017, claimant was evaluated at Sanford Medical Center for right shoulder pain. Claimant did not have a specific injury. He indicated his work

irritated his shoulder problems. Claimant was given a home exercise program. (JE5, pp. 99-103)

In February, March and April of 2018, claimant had chiropractic treatments for his neck and back. (JE2, pp. 89-92)

On April 26, 2018, claimant underwent a functional capacity evaluation (FCE). Claimant was found to have given valid effort. The FCE found claimant could work at the very heavy demand level. Claimant was found to be able to lift up to 100 pounds occasionally. He was limited to avoid frequent to constant shoulder reaching forward with the right upper extremity. (Ex. 5)

On May 18, 2018, claimant underwent an independent medical evaluation (IME) with Christopher Janssen, M.D. Dr. Janssen gave his opinions of claimant's condition in a report following the exam. Claimant had shoulder pain beginning one year prior. Claimant indicated he had to miss work due to right shoulder pain. (Ex. 3, pp. 1-8)

Dr. Janssen assessed claimant as having a right rotator cuff tendinopathy secondary to repetitive use dated to November 13, 2017. Dr. Janssen opined that claimant sustained a right shoulder injury, which was more likely than not, and secondary to repetitive use at work. Dr. Janssen noted "the lack of a pre-existing condition, mechanism of injury, timeline and objective findings support this causation opinion." (JE3, p. 15)

Dr. Janssen opined claimant would probably require physical therapy, an MRI of the right shoulder, and that claimant was not at maximum medical improvement (MMI) for the right shoulder. He opined restrictions in claimant's May of 2018 FCE should apply. (Ex. 3, p. 12)

On June 4, 2018, claimant was evaluated at the Sanford Canton clinic for a stiff neck. Claimant thought his condition was work related, but did not submit it to workers' compensation. Claimant was assessed as having a neck strain. (JE7, p. 127) Claimant was given a return to work slip for his neck by Dr. Johnson. (JE7, p. 136)

On June 11, 2018, claimant was evaluated for lower back pain by Dr. Johnson. Claimant sustained an injury while bending over at work. Dr. Johnson limited claimant to lifting up to 20 pounds and returned claimant to work. (JE7, pp. 137-138, 145)

On June 21, 2018, claimant was evaluated for bilateral shoulder pain, right greater than left. Claimant was returned to work with no use of bilateral arms above shoulder level. (JE8, pp. 153-165)

Claimant was again evaluated for bilateral shoulder pain, right greater than left, on July 12, 2018, by Donella Herman, M.D. Claimant was given an injection in the right shoulder. Claimant was assessed as having tendonitis. (JE8, pp. 166, 171-172)

On or about August 29, 2018, claimant began working part-time at Rock Industries. Claimant requested to go on part-time work. (Tr. p. 74)

On February 14, 2019, claimant underwent an MRI of the right shoulder. It showed mild arthritic changes in the AC joint. (JE6, p. 104)

On February 20, 2019, claimant was evaluated at Sanford Rehabilitation Specialists. Claimant indicated no significant neck pain and occasionally burning pain at approximately the C7 level, that was a problem for years. (JE10)

On August 7, 2019, claimant had an MRI of the cervical spine. The MRI showed degenerative changes at the C3-4 levels and mild spondylotic neural foraminal narrowing. (JE1, p. 9)

On January 23, 2020, claimant voluntarily quit his job at Rock Industries. (Ex. B, p. 22)

On February 25, 2020, claimant underwent a functional capacity assessment (FCA). The evaluator for the FCA did not have a job description of claimant's position at Rock Industries. Claimant was limited to lifting and carrying 50 pounds occasionally and lifting 50 pounds from the floor occasionally. (Ex. 6)

At the time of hearing claimant was not working. Claimant had not looked for work since leaving Rock Industries. (Transcript p. 75)

Claimant said he had shoulder pain. He said he did not think he could return to work at Rock Industries due to his neck and shoulder pain. (Tr. p. 67)

CONCLUSIONS OF LAW

The first issue to be determined is whether claimant sustained an injury that arose out of and in the course of employment.

The party who would suffer loss if an issue were not established has the burden of proving that issue by a preponderance of the evidence. Iowa Rule of Appellate Procedure 6.14(6).

The claimant has the burden of proving by a preponderance of the evidence that the alleged injury actually occurred and that it both arose out of and in the course of the employment. Quaker Oats Co. v. Ciha, 552 N.W.2d 143 (Iowa 1996); Miedema v. Dial Corp., 551 N.W.2d 309 (Iowa 1996). The words "arising out of" referred to the cause or source of the injury. The words "in the course of" refer to the time, place, and circumstances of the injury. 2800 Corp. v. Fernandez, 528 N.W.2d 124 (Iowa 1995). An injury arises out of the employment when a causal relationship exists between the injury and the employment. Miedema, 551 N.W.2d 309. The injury must be a rational consequence of a hazard connected with the employment and not merely incidental to

the employment. Koehler Electric v. Wills, 608 N.W.2d 1 (Iowa 2000); Miedema, 551 N.W.2d 309. An injury occurs "in the course of" employment when it happens within a period of employment at a place where the employee reasonably may be when performing employment duties and while the employee is fulfilling those duties or doing an activity incidental to them. Ciha, 552 N.W.2d 143.

The claimant has the burden of proving by a preponderance of the evidence that the injury is a proximate cause of the disability on which the claim is based. A cause is proximate if it is a substantial factor in bringing about the result; it need not be the only cause. A preponderance of the evidence exists when the causal connection is probable rather than merely possible. George A. Hormel & Co. v. Jordan, 569 N.W.2d 148 (Iowa 1997); Frye v. Smith-Doyle Contractors, 569 N.W.2d 154 (Iowa App. 1997); Sanchez v. Blue Bird Midwest, 554 N.W.2d 283 (Iowa App. 1996).

The question of causal connection is essentially within the domain of expert testimony. The expert medical evidence must be considered with all other evidence introduced bearing on the causal connection between the injury and the disability. Supportive lay testimony may be used to buttress the expert testimony and, therefore, is also relevant and material to the causation question. The weight to be given to an expert opinion is determined by the finder of fact and may be affected by the accuracy of the facts the expert relied upon as well as other surrounding circumstances. The expert opinion may be accepted or rejected, in whole or in part. St. Luke's Hosp. v. Gray, 604 N.W.2d 646 (Iowa 2000); IBP, Inc. v. Harpole, 621 N.W.2d 410 (Iowa 2001); Dunlavey v. Economy Fire and Cas. Co., 526 N.W.2d 845 (Iowa 1995). Miller v. Lauridsen Foods, Inc., 525 N.W.2d 417 (Iowa 1994). Unrebutted expert medical testimony cannot be summarily rejected. Poula v. Siouxland Wall & Ceiling, Inc., 516 N.W.2d 910 (Iowa App. 1994).

When the injury develops gradually over time, the cumulative injury rule applies. The date of injury for cumulative injury purposes is the date on which the disability manifests. Manifestation is best characterized as that date on which both the fact of injury and the causal relationship of the injury to the claimant's employment would be plainly apparent to a reasonable person. The date of manifestation inherently is a fact based determination. The fact-finder is entitled to substantial latitude in making this determination and may consider a variety of factors, none of which is necessarily dispositive in establishing a manifestation date. Among others, the factors may include missing work when the condition prevents performing the job, or receiving significant medical care for the condition. For time limitation purposes, the discovery rule then becomes pertinent so the statute of limitations does not begin to run until the employee, as a reasonable person, knows or should know, that the cumulative injury condition is serious enough to have a permanent, adverse impact on his or her employment. Herrera v. IBP, Inc., 633 N.W.2d 284 (Iowa 2001); Oscar Mayer Foods Corp. v. Tasler, 483 N.W.2d 824 (Iowa 1992); McKeever Custom Cabinets v. Smith, 379 N.W.2d 368 (Iowa 1985).

Claimant contends he sustained a neck, back and shoulder injury on November 13, 2017, caused by repetitive motion and repetitive lifting at work at Rock Industries.

Claimant has consistently treated for neck and back problems dating back to 2010. Claimant testified at hearing that he has treated for lower back problems since he was 15 years old. (JE5, p. 98; Tr. p. 82) No expert has opined that there is a causal connection between claimant's neck and back condition and his work at Rock Industries. Claimant testified, at least two times in hearing, he is not seeking a claim for a back injury against Rock Industries. (Tr. pp. 87-89) Given this record, claimant has failed to carry his burden of proof he sustained a neck or back injury that arose out of and in the course of employment at Rock Industries.

Regarding the right shoulder injury, Dr. Johnson told claimant in 2015 that his right shoulder problems were probably due to his work. (JE1, p. 1) Dr. Janssen also opined that claimant's right shoulder condition was caused by his work at Rock Industries. (Ex. 3, p. 16) There is no expert opinion that contradicts either opinion. Given this record, claimant has carried his burden of proof that his right shoulder injury arose out of and in the course of employment at Rock Industries.

The next issue to be determined is if claimant's claim for benefits is barred by application of Iowa Code section 85.26.

Iowa Code section 85.26(1) requires an employee to bring an original proceeding for benefits within two years from the date of the occurrence of the injury if the employer has paid the employee no weekly indemnity benefits for the claimed injury. If the employer has paid the employee weekly benefits on account of the claimed injury, however, the employee must bring an original proceeding within three years from the date of last payment of weekly compensation benefits.

Failure to timely commence an action under the limitation statute is an affirmative defense which defendants must prove by a preponderance of the evidence. DeLong v. Highway Commission, 229 Iowa 700, 295 N.W. 91 (1940); Venenga v. John Deere Component Works, 498 N.W.2d 422 (Iowa Ct. App. 1993).

When the injury develops gradually over time, the cumulative injury rule applies. The date of injury for cumulative injury purposes is the date on which the disability manifests. Manifestation is best characterized as that date on which both the fact of injury and the causal relationship of the injury to the claimant's employment would be plainly apparent to a reasonable person. The date of manifestation inherently is a fact-based determination. The fact-finder is entitled to substantial latitude in making this determination and may consider a variety of factors, none of which is necessarily dispositive in establishing a manifestation date. Among others, the factors may include missing work when the condition prevents performing the job, or receiving significant medical care for the condition. For time limitation purposes, the discovery rule then

becomes pertinent so the statute of limitations does not begin to run until the employee, as a reasonable person, knows or should know, that the cumulative injury condition is serious enough to have a permanent, adverse impact on his or her employment. Herrera v. IBP, Inc., 633 N.W.2d 284 (Iowa 2001); Oscar Mayer Foods Corp. v. Tasler, 483 N.W.2d 824 (Iowa 1992); McKeever Custom Cabinets v. Smith, 379 N.W.2d 368 (Iowa 1985).

An original proceeding for benefits must be commenced within two years from the date of the occurrence of the injury for which benefits are claimed or within three years from the date of the last payment of weekly compensation benefits if benefits have been paid under Iowa Code section 86.13. Iowa Code section 85.26(1). Under the rule, the time during which a proceeding may be commenced does not begin to run until the claimant, as a reasonable person, should recognize the nature, seriousness and probable compensable character of the condition. Failure to timely commence an action under the limitations statute is an affirmative defense, which defendants must prove by a preponderance of the evidence. Venenga v. John Deere Component Works, 498 N.W.2d 422 (Iowa Ct. App. 1993).

For a cumulative injury, the beginning of that period may not begin, under the discovery rule, until the worker knows the nature of the disability, the seriousness of the disability, and the probable compensable nature of the disability. Chapa v. John Deere Ottumwa Works, 652 N.W.2d 187 (Iowa 2002). See also Larson Mfg. Co. v. Thorson, 763 N.W.2d 842, 854–55 (Iowa 2009); Midwest Ambulance Serv. v. Ruud, 754 N.W.2d 860, 865 (Iowa 2008); Swartzendruber v Schimmel, 613 N.W.2d 646 (Iowa 2000).

In this case, defendants have the burden of proof to show claimant knew the nature of his injury, the seriousness of the disability, and the probable compensable nature of the disability.

Regarding the nature of the disability, the record indicates that claimant saw his family physician, Dr. Johnson, in November of 2015 for right shoulder pain. (JE1, p. 1) Claimant was also evaluated in November of 2017 for shoulder pain that had been worsening for the past five months. (JE7, p. 109) Given this record, it is found that claimant knew the nature of his disability.

Regarding the probable compensability of his right shoulder, claimant did file notice with his employer regarding an upper extremity injury in January of 2012. On that report, claimant indicated that he had pain in his fingers and that he was told that this could potentially cause shoulder problems. (Ex. B, p. 5) Claimant was also told by Dr. Johnson in November of 2015 that his right shoulder pain was probably due to his work at Rock Industries. Given this record, it is found that claimant knew or should have known of the probable compensable nature of his shoulder injury.

Regarding the seriousness of the disability, there is scant evidence claimant knew of the seriousness of his injury until he reported it to his employer in November of 2017. (Tr. pp. 98-99)

Claimant filed his petition for benefits for his right shoulder in this matter on June 21, 2019. The record indicates that claimant knew he suffered a right shoulder injury and that a right shoulder injury was probably compensable. However, there is little evidence to suggest claimant knew of the seriousness of his right shoulder injury until November of 2017. Given this record, defendants have failed to carry their burden of proof that claimant's claim for benefits is barred by application of Iowa Code section 85.26.

The next issue to be determined is whether claimant's claim for benefits is barred by application of Iowa Code section 85.23.

Iowa Code section 85.23 requires an employee to give notice of the occurrence of an injury to the employer within 90 days from the date of the occurrence, unless the employer has actual knowledge of the occurrence of the injury.

The purpose of the 90-day notice or actual knowledge requirement is to give the employer an opportunity to timely investigate the facts surrounding the injury. The actual knowledge alternative to notice is met when the employer, as a reasonably conscientious manager, is alerted to the possibility of a potential compensation claim through information which makes the employer aware that the injury occurred and that it may be work related. Dillinger v. City of Sioux City, 368 N.W.2d 176 (Iowa 1985); Robinson v. Department of Transp., 296 N.W.2d 809 (Iowa 1980).

Failure to give notice is an affirmative defense which the employer must prove by a preponderance of the evidence. DeLong v. Highway Commission, 229 Iowa 700, 295 N.W. 91 (1940).

The 90-day limit for notice does not begin running until the employee, acting reasonably, should know her injuries are both serious and work connected. Robinson v. Department of Transp., 296 N.W.2d 809, 812 (1980).

The burden rests on the employer to prove claimant did not provide the 90-day notice. Once the employer can show an affirmative defense under Iowa Code section 85.23, the burden shifts to the employee to show the discovery rule exception applies. IBP, Inc. v. Burress, 779 N.W.2d 210, 219 (Iowa 2010).

Based on the law detailed above, the manifest date of injury is when claimant knew, or should have known, the injury was work-related; and when claimant knew or should have known the injury was serious.

As detailed above, the record indicates claimant knew or should have known that his right shoulder injury was work related in 2015. However, there is little evidence that

claimant was aware of the seriousness of his injury until he gave notice of his injury in November of 2017 to Rock Industries. Based on this, it is found that defendants have failed to carry their burden of proof that claimant's claim for benefits is barred by application of Iowa Code section 85.23.

The next issue to be determined is if claimant's injury resulted in a temporary disability.

Healing period compensation describes temporary workers' compensation weekly benefits that precede an allowance of permanent partial disability benefits. Ellingson v. Fleetguard, Inc., 599 N.W.2d 440 (Iowa 1999). Section 85.34(1) provides that healing period benefits are payable to an injured worker who has suffered permanent partial disability until the first to occur of three events. These are: (1) the worker has returned to work; (2) the worker medically is capable of returning to substantially similar employment; or (3) the worker has achieved maximum medical recovery. Maximum medical recovery is achieved when healing is complete and the extent of permanent disability can be determined. Armstrong Tire & Rubber Co. v. Kubli, Iowa App., 312 N.W.2d 60 (Iowa 1981). Neither maintenance medical care nor an employee's continuing to have pain or other symptoms necessarily prolongs the healing period.

When an injured worker has been unable to work during a period of recuperation from an injury that did not produce permanent disability, the worker is entitled to temporary total disability benefits during the time the worker is disabled by the injury. Those benefits are payable until the employee has returned to work, or is medically capable of returning to work substantially similar to the work performed at the time of injury. Section 85.33(1).

There is little evidence in the record to indicate that claimant is due temporary benefits due to his right shoulder injury. Given this lack of evidence, claimant has failed to carry his burden of proof he is due temporary benefits of any kind regarding his right shoulder injury.

The next issue to be determined is whether claimant's injury is a cause of permanent disability. Claimant notes in the hearing report that he is not at MMI. Dr. Janssen indicates in his IME that claimant is not at MMI. There is no expert opinion that contradicts Dr. Janssen's finding that claimant is not at MMI. Given this record, it is found the issue of whether claimant's injury resulted in a permanent disability is not ripe for adjudication at this time.

The next issue to be determined is whether there is a causal relationship between the injury and the claimed medical expenses.

The employer shall furnish reasonable surgical, medical, dental, osteopathic, chiropractic, podiatric, physical rehabilitation, nursing, ambulance, and hospital services

and supplies for all conditions compensable under the workers' compensation law. The employer shall also allow reasonable and necessary transportation expenses incurred for those services. The employer has the right to choose the provider of care, except where the employer has denied liability for the injury. Section 85.27. Holbert v. Townsend Engineering Co., Thirty-second Biennial Report of the Industrial Commissioner 78 (Review-Reopening October 16, 1975).

In Exhibit 2, claimant offers a medical bill spreadsheet. There are no copies of medical bills in the record to support the spreadsheet. Many of the billings in the spreadsheet appear to relate to claimant's neck and back condition. As noted above, it is found that claimant has failed to carry his burden of proof that his neck and back conditions arose out of and in the course of employment. Given this record, claimant has failed to carry his burden of proof defendants are liable for payment of any of the billings shown in Exhibit 2.

The final issue to be determined is whether claimant is due reimbursement for an IME.

Section 85.39 permits an employee to be reimbursed for subsequent examination by a physician of the employee's choice where an employer-retained physician has previously evaluated "permanent disability" and the employee believes that the initial evaluation is too low. The section also permits reimbursement for reasonably necessary transportation expenses incurred and for any wage loss occasioned by the employee attending the subsequent examination.

Defendants are responsible only for reasonable fees associated with claimant's independent medical examination. Claimant has the burden of proving the reasonableness of the expenses incurred for the examination. See Schintgen v. Economy Fire & Casualty Co., File No. 855298 (App. April 26, 1991). Claimant need not ultimately prove the injury arose out of and in the course of employment to qualify for reimbursement under section 85.39. See Dodd v. Fleetguard, Inc., 759 N.W.2d 133, 140 (Iowa App. 2008).

Regarding the IME, the Iowa Supreme Court provided a literal interpretation of the plain-language of Iowa Code section 85.39, stating that section 85.39 only allows the employee to obtain an independent medical evaluation at the employer's expense if dissatisfied with the evaluation arranged by the employer. Des Moines Area Reg'l Transit Auth. v. Young, 867 N.W.2d 839, 847 (Iowa 2015).

Under the Young decision, an employee can only obtain an IME at the employer's expense if an evaluation of permanent disability has been made by an employer-retained physician.

Dr. Janssen gave his opinion of claimant's permanent impairment in an IME dated May 18, 2018. There is no opinion regarding permanent impairment from an

employer-retained expert in the record. Given this, claimant has failed to carry his burden of proof he is due reimbursement for an IME.

ORDER

THEREFORE, IT IS ORDERED:

That claimant has carried his burden of proof that he sustained a right shoulder injury that arose out of and in the course of employment on November 13, 2017.

That both parties shall pay their own costs.

Signed and filed this 3rd day of December, 2020.

JAMES F. CHRISTENSON
DEPUTY WORKERS'
COMPENSATION COMMISSIONER

The parties have been served, as follows:

David J. King (via WCES)

Rene C. Lapierre (via WCES)

Right to Appeal: This decision shall become final unless you or another interested party appeals within 20 days from the date above, pursuant to rule 876-4.27 (17A, 86) of the Iowa Administrative Code. The notice of appeal must be filed via Workers' Compensation Electronic System (WCES) unless the filing party has been granted permission by the Division of Workers' Compensation to file documents in paper form. If such permission has been granted, the notice of appeal must be filed at the following address: Workers' Compensation Commissioner, Iowa Division of Workers' Compensation, 150 Des Moines Street, Des Moines, Iowa 50309-1836. The notice of appeal must be received by the Division of Workers' Compensation within 20 days from the date of the decision. The appeal period will be extended to the next business day if the last day to appeal falls on a weekend or legal holiday.