

BEFORE THE IOWA WORKERS' COMPENSATION COMMISSIONER

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BRUCE BONORDEN,

Claimant,

vs.

ZIEGLER, INC.,

Employer,

and

FEDERATED MUTUAL INSURANCE  
COMPANY,

Insurance Carrier,  
Defendants.

**FILED**  
MAY 09 2019  
WORKERS' COMPENSATION

File No. 5045352

REVIEW-REOPENING  
DECISION

Head Note No.: 2501

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STATEMENT OF THE CASE

Bruce Bonorden, claimant, filed a petition seeking review-reopening of a prior decision of this agency. Specifically, claimant seeks to review and reopen a January 23, 2015 arbitration decision, which was summarily affirmed by the Iowa Workers' Compensation Commissioner on April 4, 2016.

In the underlying arbitration decision, the presiding deputy commissioner found that claimant sustained compensable injuries to his right leg and left leg as the result of a single accident. The deputy commissioner in the underlying arbitration proceeding awarded claimant one-hundred ten (110) weeks of permanent partial disability benefits as a result of his work injury occurring on February 18, 2013. Defendants were also ordered to pay any of claimant's prior medical expenses submitted by the claimant at the hearing. Additionally, defendants were ordered to pay the future medical expenses of the claimant necessitated by the work injury.

Claimant filed a review-reopening petition on July 26, 2018, seeking an increase in his permanent disability award. This review-reopening proceeding was set for hearing before the undersigned on April 24, 2019 in Fort Dodge, Iowa. However, the parties waived their right to a hearing. The parties submitted stipulations to the undersigned via a hearing report and order. I approved the hearing report and order. The parties' stipulations are accepted and are now relied upon in entering this decision.

The parties are bound by their stipulations. No additional testimony or evidence was offered or received.

### STIPULATIONS

The parties submitted the following stipulations:

1. The existence of an employer-employee relationship at the time of the alleged injury.
2. Claimant sustained an injury on February 18, 2013, which arose out of and in the course of his employment.
3. The alleged injury is a cause of temporary disability during a period of recovery.
4. The alleged injury is a cause of permanent disability during a period of recovery.
5. At the time of the alleged injury, claimant's gross earnings were \$562.91 per week.
6. At the time of the alleged injury, claimant was single.
7. At the time of the alleged injury, claimant was entitled to one exemption.
8. The parties believe the weekly workers' compensation rate to be \$360.34.
9. The parties stipulate that the claimant continues to receive medical treatment and medical bills causally related to the work injury and which treatment has been authorized have been paid by defendants. Pursuant to Iowa Code §85.35(6) employer will remain responsible for and pay causally related medical expenses pursuant to Iowa Code §85.27. Employer maintains the right to direct care and contest the reasonableness, necessity and compensability of such future bills.

### FINDINGS OF FACT

The undersigned, having considered all of the evidence and testimony in the record, finds:

Claimant is not seeking any additional weekly benefits. Claimant is not seeking payment of past medical benefits. Neither party is seeking an assessment of costs. I accept all of the stipulations of the parties. The parties did not identify any disputes for the undersigned to determine at this time. No additional findings of fact are required.

### CONCLUSIONS OF LAW AND REASONING

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 1975).

Iowa Code §85.35(6) states:

The parties to any settlement made pursuant to this section may agree that the employee has the right to benefits pursuant to section 85.27 under such terms and conditions as agreed to by the parties in the settlement, for a specified period of time after the settlement has been approved by the workers' compensation commissioner. During that specified period of time, the commissioner shall have jurisdiction of the settlement for the purpose of adjudicating the employee's entitlement to benefits provided for in section 85.27 as agreed upon in the settlement.

Based on the parties' stipulations, claimant continues to receive medical treatment and medical bills causally related to the work injury and which treatment has been authorized have been paid by defendants. Pursuant to Iowa Code §85.35(6) employer will remain responsible for and pay causally related medical expenses pursuant to Iowa Code §85.27. Employer maintains the right to direct care and contest the reasonableness, necessity, and compensability of such future bills.

### ORDER

THEREFORE, IT IS ORDERED:

Claimant shall take no further weekly benefits from these proceedings.

Claimant continues to receive medical treatment and medical bills causally related to the work injury and which treatment has been authorized have been paid by defendants. Pursuant to Iowa Code §85.35(6) employer will remain responsible for and pay causally related medical expenses pursuant to Iowa Code §85.27. Employer maintains the right to direct care and contest the reasonableness, necessity and compensability of such future bills. The parties shall bear their own costs associated with this case.

Defendants shall file subsequent reports of injury (SROI) as required by this agency pursuant to rules 876 IAC 3.1(2), and 876 IAC 11.7.

Signed and filed this 9<sup>th</sup> day of May, 2019.



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ERIN Q. PALS  
DEPUTY WORKERS'  
COMPENSATION COMMISSIONER

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EQP/sam

**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 in writing and received by the commissioner's office 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 a legal holiday. The notice of appeal must be filed at the following address: Workers' Compensation Commissioner, Iowa Division of Workers' Compensation, 1000 E. Grand Avenue, Des Moines, Iowa 50319-0209.