BEFORE THE IOWA WORKERS' COMPENSATION COMMISSIONER

CARLTON PHILLIPS, JR.,	
	File No. 1642343.01
Claimant,	
VS.	ARBITRATION DECISION
CRST EXPEDITED, INC.,	· · ·
Employer,	: Head Note No.: 1801, 1803, 2500, : 2502, 2700, 1700
Self-Insured,	:
Defendant.	:

STATEMENT OF THE CASE

Claimant, Carlton Phillips, has filed a petition for arbitration seeking workers' compensation benefits against CRST Expedited, Inc., a self-insured employer, defendant.

In accordance with agency scheduling procedures and pursuant to the Order of the Commissioner in the matter of the Coronavirus/COVID-19 Impact on Hearings, the hearing was held on April 15, 2021, via CourtCall. The record was kept open until April 23, 2021, to allow additional briefing on the evidentiary issues and the case was considered fully submitted on May 12, 2021, upon the simultaneous filing of briefs.

The record consists of Joint Exhibits 1-3, Claimant's Exhibits 1-8, Defendant's exhibits A, C-F, H-K, and N, along with the testimony of claimant, Deb Mentzer, and Sara Palmer.

ISSUES

- 1. Whether claimant is entitled to temporary benefits from September 20, 2019, to the present;
- 2. The extent of permanent disability;
- 3. The commencement date of PPD;
- 4. Whether claimant is entitled to reimbursement of medical expenses;
- 5. Whether claimant is entitled to reimbursement of an IME pursuant to 85.39;
- 6. Whether claimant is entitled to alternate care;

- 7. Entitlement to credit;
- 8. The assessment of costs.

STIPULATIONS

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.

The parties stipulate claimant sustained an injury arising out of and in the course of his employment on January 11, 2018. They further agree that the injury was the cause of some temporary disability during a period of recovery, however dispute the extent of claimant's entitlement to temporary benefits.

The parties agree that if a permanent disability is found, it is industrial in nature.

At the time of the accepted injury, the claimant's gross earnings were \$590.43 per week. The claimant was single and entitled to one exemption. Based on the foregoing, the weekly benefit rate is \$368.17.

Defendant waives all affirmative defenses.

FINDINGS OF FACT

Claimant, Carlton Phillips, was a 41-year-old person at the time of the hearing. Claimant graduated from high school in 1997. He attended trade and community college receiving certificates in the electrical trade and Microsoft Office. (CE 6:31) His work history includes fast food service, temporary work at various factories, shuttle driver, chicken processing plant work, installer for cable and satellite services, barber services, warehouse and assembly, banquet and hotel work, and truck driving.

Past medical issues of note include a right ankle injury suffered during high school sports and gun shots in the right hand, left arm and left thigh as a teenager.

Claimant is not currently employed but is seeking new employment. He renewed his CDL in 2019 and underwent a driver examination in which he was cleared to perform over-the-road trucking.

On or about January 11, 2018, claimant was occupying the sleeper berth of a semi tractor-trailer when the driver ran into an overpass.

He was seen on the same date by Kaitlyn Jennings, PA-C, at Trinity Health of New England. (JE 1:1) He reported head, neck, and back pain and was uncertain whether he lost consciousness. <u>Id.</u> A CT of the cervical spine and the head were conducted which

showed no evidence of fracture, subluxation, or intracranial traumatic injury. (JE 1:5) He was administered Toradol and discharged with pain prescriptions. (JE 1:6)

He was then seen again on January 13, 2018, at Health Partners in Minnesota by Emily A. Arcand, PA-C. (JE 2:7) He reported neck pain, upper back, lower back, knee and wrist pain and denied taking any medication for pain. (JE 2:7) X-rays were taken of the wrist and knee which showed no fractures, dislocations, or joint effusions. (JE 2:9) He exhibited tenderness to the left wrist with full range of motion, tenderness to the left knee over the medial aspect with full range of motion, and tenderness in the cervical paraspinal and lumbar paraspinal regions. (JE 2:10) He was diagnosed with muscle and tendon strain and referred for physical therapy. (JE 3.1:11)

On January 31, 2018, claimant was seen at HealthWorks Medical Group. (JE 3.1:12) He reported cervical, thoracic and lumbar pain, left knee pain, and left wrist pain. (JE 3.1:12) There were spasms of the paravertebral musculature and tenderness along bilateral trapezius muscles as well as the thoracolumbar spine and paravertebral musculature. (JE 3.1:14) His left patella was tender and so was the extensor surface of the left wrist. (JE 3.1:14) Diagnoses included left knee pain, left wrist pain, strain of the lumbar region, strain of muscle and tendon of back wall of thorax. (JE 3.1:15) The conclusion was that the MVA was more likely than not the cause of the pain symptoms. Id. Claimant was issued a wrist brace, a heat therapy band for the back, ThermaCare for the lower back, hip, neck, wrist and shoulder. (JE 3.1:16) He was allowed to return to work with restrictions of no lifting more than 15 pounds, no forceful pushing or pulling, no bending or stooping, no kneeling or squatting, no climbing stairs or ladders, no driving a company vehicle. He also needed to be able to alternate sitting and standing periodically. (JE 3.1:17) Claimant was referred to physical therapy for two times per week for three weeks. Id.

On February 5, 2018, claimant returned to HealthWorks Medical Group for a follow up. (JE 3.1:18) Claimant reported the same pain in the left knee, left wrist, upper and lower back. (JE 3.1:18) He exhibited swelling from muscle spasms in the thoracolumbar spine as well as spasms in the thoracolumbar and paravertebral musculature with limited range of motion in the back. (JE 3.1:20) His straight leg raising test was positive bilaterally. <u>Id.</u> Despite having somewhat worsened conditions, Nurse Practitioner Colleen Caspers signed off on a full return to work with no restrictions and instructed claimant to follow up with physical therapy for two more weeks. (JE 3.1:21-22, 3.2:46)

Claimant returned to HealthWorks Medical Group on February 14, 2018, with reports of posterior cervical pain, neck pain, restrictions in the range of motion of his neck, pain in the back, limited back motion, pain in the wrist with motion, and knee pain. (JE 3.1:23) He exhibited tenderness in the neck, mid to low back, knee, and left wrist with restricted range of motion of the neck, mid to low back, and the left wrist. (JE 3.1:26) More physical therapy was ordered and claimant was instructed to continue with naproxen and cyclobenzaprine. (JE 3.1:28)

On February 14, 2018, Dr. Vlahos took claimant off work completely. (JE 3.2:47)

Claimant returned to Healthworks Medical Group on February 27, 2018 with continued complaints of pain. (JE 3.1:30) Claimant was instructed to continue with physical therapy and his naproxen and cyclobenzaprine. <u>Id.</u> Dr. Vlahos continued to keep claimant off work. (JE 3.1:33)

On March 8, 2018, claimant was seen by Dr. Vlahos. (JE 3.1:34) He complained of low back pain, moderately severe and characterized as sharp and dull. <u>Id.</u> He also complained of radiation of back pain into the left shin, limited back motion, neck pain and weakness with motion, and faint weakness and pain in the left wrist. (JE 3.1:34-35) For the left knee, claimant denied pain, weakness, numbness, tingling or restriction in range of motion. (JE 3.1:34) He had a normal gait and normal posture with tenderness and spasms in the neck, tenderness in the low back with restricted motion in both the neck and low back. (JE 3.1:36) The left knee was normal, and the wrist was stable. (JE 3.1:36) An MRI was requested for the back while physical therapy was prescribed for the low back and neck symptoms. (JE 3.1:38) Claimant testified at hearing that his left wrist and left knee had improved.

Dr. Vlahos kept claimant off work until March 8, 2018, with restrictions of no lifting more than 10 pounds floor to waist and no lifting more than 5 pounds from waist to shoulder. He was to avoid forceful pushing, pulling, bending, stooping, climbing stairs or ladders. (JE 3.1:38)

Claimant returned to Dr. Vlahos on March 15, 2018, with persistent back pain and improving neck pain. (JE 3.1:40) Dr. Vlahos approved claimant's return to work with the previously articulated restrictions and continued claimant on PT. (JE 3.1:43)

The MRI had not been approved. Ms. Mentzer testified on behalf of the defendant that the medical providers do not need approval for testing or treatment. Ms. Mentzer did not dispute that the MRI was recommended, but rather that it was claimant's duty to follow up with Dr. Vlahos. Ms. Mentzer conceded that she did not inform the claimant he was able to return to Dr. Vlahos at any time. Sara Palmer testified that she attempted to reach claimant on March 15, 2018 but that she was not able to contact him. A letter was sent to him informing him of a transitional position at Salvation Army. Claimant testified that the offered \$7.00 an hour wage was not a livable wage for him. Instead he returned to the trucking field as an independent contractor doing over-the-road truck driving for Hirschbach on March 19, 2018. (Trans p. 67)

Claimant testified that he was physically not able to perform all the essential duties and was let go on or around September 20, 2019. He then attempted to work for J.B. Hunt, but testified that he was not able to work due to the physical condition of his body. (DE A:18; E:18) However, at hearing and during his deposition, he admitted he was let go due to a refusal of work, among other issues.

While he has state health Insurance, he does not have sufficient funds to pay medical co-pays and has not sought out treatment on his own.

On January 15, 2021, Dr. Vlahos filled out a checklist letter agreeing that claimant suffered a work-related injury to his neck, left knee, and left wrist. (CE 1:4-6) She further opined that he sustained a 10 percent permanent impairment as a result of the neck injury and recommended permanent restrictions of no lifting over 30 pounds floor to waist and waist to shoulder. (CE 1:5) While Dr. Vlahos agreed claimant was at MMI, she did not provide a date at which claimant reached MMI for the neck, but set March 8, 2018, as the MMI date for the left wrist and left knee. (CE 1:5-6) Dr. Vlahos did not find any permanent impairment to the left wrist or left knee and recommended no restrictions. (CE 1:6-7)

On April 12, 2021, Dr. Vlahos acknowledged that she has not examined or treated claimant since April 2018 and as such would not be able to render a medical opinion as to any permanent injury that may exist today and would not be able to issue an opinion regarding permanent restrictions or impairment. (DE C:8)

On September 30, 2020, Richard L. Kreiter, M.D., conducted an IME and concluded that claimant's low back pain appeared to be more sacroiliac joint and gluteal discomfort without significant sciatica. (CE 2:8) The left knee was "date of injury complaint" and he had no prior history of knee pathology prior to the injury date of January 11, 2018. (CE 2:8) Dr. Kreiter documented patellofemoral findings, the feeling of instability and giving away of the knee on occasion. (CE 2:8) The upper left extremity complaints of numbness, tingling, and grip weakness appeared to be more from a cubital tunnel or ulnar nerve issue rather than symptoms of a cervical disc condition. (CE 2:8) Dr. Kreiter found the neck symptoms to be more myofascial in nature with trapezius pain, scapular discomfort and tension headaches with no obvious radiculopathy. (CE 2:8)

In a checklist letter signed January 18, 2021, Dr. Kreiter agreed claimant suffered a work-related injury to the neck, low back, left knee, and left wrist. (CE 2:14-17) He did not believe that claimant was at MMI for the low back, neck or left wrist, but assigned a 5 percent whole person impairment for the neck and low back and 3 percent for the left knee. (CE 2:14-17) He opined that claimant reached MMI for the left knee around June 2018. (CE 2:16)

Dr. Kreiter charged \$1,000.00 for the examination and \$250.00 for additional correspondence. (CE 4:22) Defendants have paid benefits through April 19, 2018.

CONCLUSIONS OF LAW

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. lowa R. App. P. 6.904(3).

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. <u>Quaker Oats Co. v. Ciha</u>, 552 N.W.2d 143 (lowa 1996); <u>Miedema v. Dial</u> <u>Corp.</u>, 551 N.W.2d 309 (lowa 1996). The words "arising out of" refer to the cause or source of the injury. The words "in the course of" refer to the time, place, and circumstances of the injury. <u>2800 Corp. v. Fernandez</u>, 528 N.W.2d 124 (lowa 1995).

An injury arises out of the employment when a causal relationship exists between the injury and the employment. <u>Miedema</u>, 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. <u>Koehler Elec. v. Wills</u>, 608 N.W.2d 1 (lowa 2000); <u>Miedema</u>, 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. <u>Ciha</u>, 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. <u>George A. Hormel & Co. v. Jordan</u>, 569 N.W.2d 148 (lowa 1997); <u>Frye v. Smith-Doyle Contractors</u>, 569 N.W.2d 154 (lowa App. 1997); <u>Sanchez v. Blue Bird Midwest</u>, 554 N.W.2d 283 (lowa App. 1996).

Claimant seeks a finding that he is entitled to additional temporary benefits beyond which he has already been paid. The last date of payment for benefits was April 19, 2018. Defendant argues that claimant failed to participate in modified duty offered to him on March 12, 2018, abandoned medical care and failed to comply with a doctor's orders to return for recheck, sought and obtained full duty unrestricted employment with another employer on March 19, 2018, and for those reasons claimant is not entitled to additional temporary benefits.

While defendant may characterize claimant's post injury movements as intentionally avoiding communication with the employer, it appears to be just a lack of understanding. Claimant was offered a position at Salvation Army. He understood the hourly wage to be \$7.00 per hour. A \$7.00 an hour paycheck was not sufficient in his view to support himself. However, he did return to work on March 19, 2018, with a new trucking company. Based on the statute, his healing period benefits ended when he returned to substantially similar work.

Claimant's release to return to work on March 15, 2018, by Dr. Vlahos came with significant work restrictions. Defendant offered "transitional" work at Salvation Army at a reduced wage. Dr. Kreiter did not find claimant to be at MMI for his left knee or wrist until June 2018. Dr. Vlahos found claimant to be at MMI for the left wrist and left knee as of March 8, 2018, but did not set a date for MMI for the neck and low back. Thus

none of the elements of Iowa Code § 85.34(1) were met prior to claimant's return to work on March 19, 2018.

He worked for the trucking company for approximately a year and a half, ending his employment sometime in August or September 2019, when he was let go. He stated the reason was he was not able to perform all the essential functions of his position due to his deteriorating physical condition. There is no medical testimony that connects his leaving employment in August 2019 to his work-related injuries and thus, it is found that there are no intermittent healing period benefits at this time, but instead, claimant returned to substantially similar work on March 19, 2018. The appropriate date of commencement for PPD benefits would be March 19, 2018.

The parties agree that claimant sustained an Injury but disagree as to the extent.

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. <u>St. Luke's Hosp. v. Gray</u>, 604 N.W.2d 646 (lowa 2000); <u>IBP, Inc. v. Harpole</u>, 621 N.W.2d 410 (lowa 2001); <u>Dunlavey v. Economy Fire and Cas. Co.</u>, 526 N.W.2d 845 (lowa 1995). <u>Miller v. Lauridsen Foods, Inc.</u>, 525 N.W.2d 417 (lowa 1994). Unrebutted expert medical testimony cannot be summarily rejected. <u>Poula v. Siouxland Wall & Ceiling, Inc.</u>, 516 N.W.2d 910 (lowa App. 1994).

Defendant argues that the claimant's injury was temporary and has since resolved. They argue that Dr. Kreiter's opinion is the only one that supports the allegation that claimant has sustained a permanent injury. Presumably they discount the opinions of Dr. Vlahos given that she has not seen claimant since his last appointment in April 2018. Defendant asked the undersigned to take judicial notice of the many instances in which Dr. Kreiter has testified before the Agency almost exclusively on behalf of the claimant. Further, defendant takes issue with Dr. Kreiter's assumption that claimant only temporarily returned to work after the injury.

Dr. Vlahos was unable to opine as to claimant's current condition, but at the time of the release in April 2018, claimant was not at MMI and still suffered neck and low back pain. His left wrist and left knee pain had resolved. This is consistent with Dr. Kreiter's findings that claimant has unresolved pain in the neck and low back that have not been fully worked up or treated. Whether Dr. Vlahos had the authority to schedule an MRI or whether claimant needed specific authorization is not necessary to resolve. Under both sets of facts, claimant needed additional diagnostic studies and according to both Dr. Vlahos and Dr. Kreiter, additional treatment. While claimant did return to work

following his injury with another trucking company and did renew his CDL, these acts show that claimant was motivated to return to work despite his disability.

Dr. Kreiter found claimant to have sustained a 5 percent impairment for the neck, a 5 percent impairment for the low back and a 3 percent impairment to the left knee for a combined value of 13 percent whole person impairment. This is consistent with Dr. Vlahos' 2018 findings that claimant sustained a 10 percent whole person impairment. The main difference is that in 2020, Dr. Kreiter found a 3 percent permanent impairment to the left knee. He documented a few left knee symptoms such as patellofemoral findings, the feeling of instability and the giving away of the knee on occasion.

While Dr. Kreiter has opined on behalf of claimants in workers' compensation matters several times in the past, his opinion is buttressed by that of Dr. Vlahos and contemporaneous medical records. Claimant did work for another trucking company for a little over a year before the employment was terminated for various reasons including accidents and possibly another job. However, claimant is currently not employed.

Based on all of the foregoing, the evidence supports adopting Dr. Kreiter's opinions and restrictions. It is found claimant has sustained a 13 percent whole person impairment.

Defendant testified that claimant may obtain the care recommended by Dr. Vlahos and indeed needed no further authorization. Claimant seeks an award of alternate care. However, it does not appear that the elements of an alternate care claim are met.

lowa Code section 85.27(4) provides, in relevant part:

For purposes of this section, the employer is obliged to furnish reasonable services and supplies to treat an injured employee, and has the right to choose the care.... The treatment must be offered promptly and be reasonably suited to treat the injury without undue inconvenience to the employee. If the employee has reason to be dissatisfied with the care offered, the employee should communicate the basis of such dissatisfaction to the employer, in writing if requested, following which the employer and the employee may agree to alternate care reasonably suited to treat the injury. If the employer and employee cannot agree on such alternate care, the commissioner may, upon application and reasonable proofs of the necessity therefor, allow and order other care.

There is no evidence showing that the claimant expressed dissatisfaction with the care offered, either orally or in writing. The correspondence between the parties in exhibit 7 pertain to an IME rather than the care recommended by Dr. Vlahos. Thus, claimant's request for a finding of alternative care is denied at this time.

Claimant is entitled to ongoing medical care related to his low back, neck, and left knee.

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. <u>Holbert v.</u> <u>Townsend Engineering Co.</u>, Thirty-second Biennial Report of the Industrial Commissioner 78 (Review-Reopening October 1975).

Claimant also seeks reimbursement for an IME in this case, however, the triggering elements such as a low or zero impairment rating from a physician retained by the defendant has not been met. Therefore, claimant is not entitled to an IME under lowa Code section 85.39.

Defendant seeks a credit of benefits paid. It was found previously that entitlement to temporary benefits ended on March 19, 2018, when claimant returned to work. No additional temporary benefits have been ordered. Thus defendant would be entitled to a credit of benefits paid from March 19, 2018, through April 19, 2018, the date of the last benefit payment made by defendant.

Claimant also requests an assessment of costs. 876 IAC 5.33 allows for the assessment of costs at the discretion of the deputy. Given that claimant has prevailed in this matter, the assessment of costs against defendant is appropriate except for the examination of Dr. Kreiter. Only reports are permissible under 876 IAC 4.33.

Claimant also seeks penalty benefits. It is undisputed that claimant's benefits were terminated on or about April 19, 2018. At that time, the medical records from Dr. Vlahos indicated claimant was not at MMI and needed additional testing and treatment. However, claimant was noncommunicative and had taken a new position with another trucking company.

If weekly compensation benefits are not fully paid when due, section 86.13 requires that additional benefits be awarded unless the employer shows reasonable cause or excuse for the delay or denial. <u>Robbennolt v. Snap-on Tools Corp.</u>, 555 N.W.2d 229 (lowa 1996).

Delay attributable to the time required to perform a reasonable investigation is not unreasonable. <u>Kiesecker v. Webster City Custom Meats, Inc.</u>, 528 N.W.2d 109 (lowa 1995).

It also is not unreasonable to deny a claim when a good faith issue of law or fact makes the employer's liability fairly debatable. An issue of law is fairly debatable if viable arguments exist in favor of each party. <u>Covia v. Robinson</u>, 507 N.W.2d 411 (lowa 1993). An issue of fact is fairly debatable if substantial evidence exists which would support a finding favorable to the employer. <u>Gilbert v. USF Holland, Inc.</u>, 637 N.W.2d 194 (lowa 2001).

An employer's bare assertion that a claim is fairly debatable is insufficient to avoid imposition of a penalty. The employer must assert facts upon which the commissioner could reasonably find that the claim was "fairly debatable." <u>Meyers v.</u> <u>Holiday Express Corp.</u>, 557 N.W.2d 502 (lowa 1996).

If the employer fails to show reasonable cause or excuse for the delay or denial, the commissioner shall impose a penalty in an amount up to fifty percent of the amount unreasonably delayed or denied. <u>Christensen v. Snap-on Tools Corp.</u>, 554 N.W.2d 254 (lowa 1996). The factors to be considered in determining the amount of the penalty include the length of the delay, the number of delays, the information available to the employer and the employer's past record of penalties. <u>Robbennolt</u>, 555 N.W.2d at 238.

In this case, the lack of communication falls upon the shoulders of the defendant. Pursuant to the statute, defendant had an ongoing obligation to investigate the claimant's alleged work claim as well as communicate with the claimant. Once claimant obtained new employment, it appears that defendant took no further action on behalf of the claimant. An injured party's return to work does not void the employer's ongoing duty to investigate and communicate. The lack of investigation abrogates against the defense of a good faith basis and becomes a bare assertion without facts.

Thus, it is found that claimant is entitled to penalty benefits. The length of the delay begins with the termination of benefits on April 19, 2018 and continues to this day. At the time, defendant knew claimant had obtained new employment with a trucking firm, had turned down a temporary position with the Salvation Army, and that there was ongoing treatment recommended, but that claimant was not following up with the authorized treating physician. Further, the defendant attempted to make contact with the claimant but was unsuccessful. It should be noted that claimant was represented by counsel as early as January 23, 2018. (See e.g. CE 8:46) Based on these factors, it is determined claimant is entitled to a 10 percent penalty benefit of all benefits owed that are late.

ORDER

THEREFORE, it is ordered:

That defendant is to pay unto claimant sixty-five (65) weeks of permanent partial disability benefits at the rate of three hundred sixty-eight and 17/100 dollars (\$368.17) per week from March 19, 2018.

That defendant is entitled to a credit of benefits paid after March 18, 2018, up to April 19, 2018, against the above ordered permanent partial disability benefits.

That claimant is entitled to ongoing and future medical care for his work-related injuries.

That defendant shall pay accrued weekly benefits in a lump sum.

That defendant shall pay interest on unpaid weekly benefits awarded herein as set forth in lowa Code section 85.30.

That defendant shall pay the costs of this matter pursuant to rule 876 IAC 4.33 except for the examination performed by Dr. Kreiter.

That claimant is entitled to ten (10) percent penalty benefits of all late paid benefits.

Signed and filed this <u>2nd</u> day of September, 2021.

JENNIFER S)GERRISH-LAMPE DEPUTY WORKERS' COMPENSATION COMMISSIONER

The parties have been served, as follows:

Mark King (via WCES)

Chris Scheldrup (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 dayif the last day to appeal falls on a weekend or legal holiday.