BEFORE THE IOWA WORKERS' COMPENSATION COMMISSIONER

EVERARDO SANCHEZ,

Claimant,

vs.

H.J. HEINZ COMPANY,

Employer,

and

LIBERTY MUTUAL INSURANCE

Insurance Carrier,
Defendants.

File No. 5053315

ARBITRATION

DECISION

Head Note Nos.: 1803, 4000.2

STATEMENT OF THE CASE

Everardo Sanchez, claimant, filed a petition in arbitration and seeks workers' compensation benefits from defendants, H.J. Heinz Company, the employer, and their workers' compensation insurance carrier, Liberty Mutual Insurance Company. The arbitration hearing was held on June 1, 2016. Counsel for the parties submitted post-hearing briefs on July 8, 2016, and the case was considered fully submitted at that time. At the time of the hearing, a page limit for the briefs was established. Claimant's brief was two pages over length and therefore said final two pages of claimant's brief were disregarded by the undersigned.

Claimant and his supervisor, Mr. Tyson Koch, both testified at hearing. It is noted that claimant testified via an interpreter, accepted by the parties, Ms. Gladys Navarro. The evidentiary record also includes Claimant's Exhibits 1 through 13, and Defendants' Exhibits A through C, both of which were received without objection.

The parties submitted a hearing report, which contained numerous stipulations. The parties' stipulations are accepted. No factual findings or conclusions of law will be made in this decision regarding the parties' stipulations.

STIPULATIONS

Pursuant to the hearing report, the parties have stipulated to the following:

1) The existence of an employer-employee relationship at the time of the alleged injury;

2) The injury date is August 4, 2014;

3) The injury was the cause of temporary disability, which is not in dispute;

4) Any permanent disability that may be found would be to a scheduled member, the left lower extremity;

5) The commencement date for any permanent partial disability benefits that may exist is July 7, 2015;

6) The applicable rate of weekly compensation is $545.22 per week;

7) Affirmative defenses are waived;

8) Medical benefits are not in dispute;

9) Claimant was paid 22 weeks of PPD compensation. However, claimant was paid a lump sum amount of $8,178.30 on September 20, 2015, at the rate of $545.22 per week (15 weeks). The hearing report indicates that claimant is owed an additional 7 weeks of PPD at the same rate, plus interest, which was requested on June 1, 2016 (the date of the hearing); and,

10) Claimant is owed mileage reimbursement of $774.37, as set forth in Claimant's Exhibit 13.

ISSUES

The parties submitted the following disputed issues for resolution:

1. The extent of permanent partial disability;

2. Whether claimant is entitled to reimbursement for an independent medical examination, under Iowa Code section 85.39;

3. Whether penalty benefits under Iowa Code section 86.13 are applicable for delay/denial of PPD, from September 21, 2015 through June 1, 2016.

FINDINGS OF FACT

The deputy workers' compensation commissioner, having heard the testimony and considered the credibility of the witnesses and the evidence in the record, finds that:

At the time of the hearing, claimant, Mr. Everardo Sanchez, was 54 years of age and had been employed by H.J. Heinz for about 19 years, working as an operator. (Transcript, page 10) Mr. Sanchez remained an employee of H.J. Heinz at the time of the hearing and was working the same job that he was working at the time of the injury. (Tr. pp. 12, 16)

Mr. Tyson Koch, claimant's supervisor, testified that he has been Mr. Sanchez's supervisor for eight years. (Tr. p. 27) Mr. Koch stated that Mr. Sanchez runs three pouch machines, which requires him to make adjustments on the machines. He is responsible for "pulling out the seals, which are 50, 60 pounds," and "he is in charge of cleaning those machines" on Friday nights or when the line is down. (Tr. p. 25) Maintaining the machines includes oiling the pistons, which requires Mr. Sanchez to use a ladder once or twice per shift. (Tr. pp. 29-30) If he is required to sterilize the machine, "he might have to go up and down it several times." (Tr. p. 30) In addition, nightly clean-up would require him to go up and down the ladder nine to twelve times. (Id.) Mr. Koch stated that Mr. Sanchez is a good worker, and he has not noticed him having any problems doing his job and he has not asked for any accommodations to do his job. (Tr. p. 26)

On August 4, 2014, Mr. Sanchez was pushing a cart/hopper when he tripped and fell, landing on the concrete on his left knee. (Tr. p. 12; Ex. A, p. 1) He had difficulty getting up and was assisted to his feet by co-workers. (Id.)

Mr. Sanchez testified that he did not have any pain in his left knee before this incident. (Tr. p. 19) There are no medical records in evidence of any medical treatment for the left knee before the above stated work injury.

On August 22, 2014, Mr. Sanchez was seen at Quad City Occupational Health, by Delos Carrier, M.D. (Ex. A, p. 1) He denied any previous injury to his left leg, although he stated at a later appointment that he had some minor aches and pains in his left leg before August 4, 2014, but that his pain now is much worse and involves intermittent locking that was not there before. (Ex. A, p. 1, 19) There is no evidence in the record that any prior aches and pains claimant may have had impacted his ability to work or any other activity. Mr. Sanchez advised Dr. Carrier that he reported the injury to his supervisor and received initial care from a therapist at the job site, and that he had been putting ice on his knee and wearing a knee sleeve, but the pain was getting worse. (Id.) Dr. Carrier obtained X-rays of the left knee that showed "severe medial compartment degenerative changes," and "multiple osteochondral bodies are seen posteriorly in the joint." (Ex. A, p. 4) Mr. Sanchez was returned to work on restricted duty, limited to 8 hours per shift and 5 days per week. (Ex. A, p. 5)

Mr. Sanchez returned to see Dr. Carrier on August 29, 2014, and reported that the pain was still getting worse, stating that it was now 7/10. (Ex. A, p. 6) Dr. Carrier stated that he was "concerned about a meniscal tear given his current complaints and physical findings. It is obvious that Mr. Sanchez has arthritis and potentially this problem may be the cause of Mr. Sanchez's residual symptoms." (Ex. A, p. 8) An MRI was requested. (Ex. A, p. 8, 10)

An MRI was finally obtained on October 29, 2014, two months after it was initially requested. (Ex. 6, p. 16; Ex. A, p. 21) The MRI impression was: "(1) Extensive numerous large intra-articular loose bodies; (2) Very severe degenerative changes of the medial compartment with complete cartilage loss, cortical remodeling, and complex

tear of the meniscus; (3) Moderately severe diffuse chondromalacia of the patellofemoral articulation; and, (4) Small Baker's cyst." (Ex. 6, pp. 16-17) Dr. Carrier stated that the MRI showed "both chronic arthritic changes and what appears [to be] some new injuries." (Id.) Dr. Carrier identified the thinning meniscus, loss of cartilage and flattening of the medial femoral condyle in the medial compartment as chronic, "non-acute changes." (Id.) He also stated that the meniscus tear "has a higher probability of being a new injury. With this in mind, I believe this represents a finding suggestive (greater than 51% medical probability given the change in his knee complaints) of an acute work-related injury." (Id.) Mr. Sanchez was then referred to an orthopedic doctor. (Ex. A, p. 23)

Mr. Sanchez was treated by John Hoffman, M.D. of Orthopaedics Specialists, P.C. (Tr. p. 14; Ex. 7; Ex. B) Dr. Hoffman administered cortisone injections, which failed to relieve the symptoms, and on January 27, 2015, he recommended arthroscopy on the left knee. (Ex. B, p. 6) At that time, Mr. Sanchez continued to have "medial-sided symptoms", including "catching and locking episodes." (Id.)

On April 1, 2015, a partial medial and partial lateral meniscectomy was performed by Dr. Hoffman. (Ex. 7, p. 1-2; Ex. B, p. 8) Following surgery, Mr. Sanchez was restricted to sit-down work only, which could not be accommodated by the employer, and he was off work for a period of time. (Ex. B, p. 10) He was prescribed physical therapy and a medial compartment unloading brace for his knee. (Ex. B, p. 11) Mr. Sanchez also had post-surgery cortisone injections, which were of little benefit. (Ex. B, pp. 13, 15, 18, 20)

On June 4, 2015, Mr. Sanchez was seen by Dr. Hoffman who stated that he had been using the knee brace for three weeks and, "When he uses the brace his knee is pretty comfortable. Without the brace his pain is 4/10 pain scale." (Ex. B, p. 19)

On July 7, 2015, Mr. Sanchez was released to return to work, full duty and placed at maximum medical improvement (MMI). At that time he was still reporting pain of 4/10. (Ex. B, pp. 21, 23)

On September 7, 2015, Dr. Hoffman answered questions posed by the workers' compensation insurance carrier, confirming that Mr. Sanchez reached MMI on July 7, 2015. (Ex. B, p. 24) Dr. Hoffman's opinion concerning the extent of permanent impairment is stated as follows: "pg 546 5th Ed lower Ext 10=4% whole person." (Id.) The undersigned understands this to translate to a 10 percent lower extremity impairment rating based on page 546 of the AMA Guides, 5th Ed., as a result of the partial lateral and medial meniscectomy performed on April 1, 2015. Dr. Hoffman stated that no part of this rating was "due to pre-existing, active or unrelated components," and he assigned no permanent restrictions. (Id.) There is no discussion about whether the underlying conditions were aggravated, accelerated or lighted-up as a result of the work injury.

On April 12, 2016, Mr. Sanchez was seen by Richard Kreiter, M.D., at the request of claimant's attorney for an independent medical examination (IME). (Ex. 3, p. 7) Dr. Kreiter opined that the fall "caused a permanent aggravation of a pre-existing condition. The injury has accelerated and hastened the development of the underlying condition. Prior to that event, Mr. Sanchez denies being seen by any medical providers for a left knee problem, and had a good work record at Heinz." (Ex. 3, p. 5) Dr. Kreiter noted that at the time of the evaluation, Mr. Sanchez was taking Tylenol regularly and Ultram intermittently. (Id.) He opined that Mr. Sanchez sustained impairment under the AMA Guides, 5th Ed. as follows: 10 percent based on the medial and lateral meniscectomy; 7 percent due to patellar instability with chondromalacia; and, 25 percent based on page 544, table 17-31, arthritis impairment, "most likely a 1 mm medial compartment interval with grade IV medial chondromalacia reported at surgery." (Ex. 3, p. 6) Dr. Kreiter did not combine the ratings based on the lower extremity, but provided a 17 percent whole person combined rating. (Id.) The undersigned agrees that the combined lower extremity impairment assigned by Dr. Kreiter as calculated by defendants in their brief is correct. (Def. Brief, p. 3) Using the combined values chart on page 604 of the AMA Guides, 5th Ed., the undersigned finds that Dr. Kreiter's combined lower extremity impairment rating is 37 percent, calculated as follows: 10 percent combined with 7 percent equals 16 percent; 25 percent combined with 16 percent equals 37 percent. Dr. Kreiter also assigned permanent work restrictions of: limited stair climbing; rare kneeling or squatting; and, no prolonged walking. (Id.)

Mr. Sanchez did not recall receiving any restrictions from Dr. Kreiter, except being told to use a cane when he is not using the knee brace, and that he had received a handicapped parking placard. (Tr. p. 18) Mr. Sanchez also testified that he was not currently working under any work restrictions in his ongoing employment at H.J. Heinz. (Id.)

Mr. Sanchez testified that he had been examined by Dr. Kreiter for about 25 minutes on one occasion for the IME, and that he had been seen by Dr. Hoffman on nine separate occasions for his knee injury. (Tr. pp. 15-16)

Dr. Kreiter charged $800.00 for the IME, which was paid by claimant's attorney. (Ex. 8, pp. 20-21) Claimant seeks reimbursement of the same. Claimant had alerted defense counsel of their intent to use Dr. Kreiter for an IME on October 9, 2015, after the rating was issued from Dr. Hoffman, on September 7, 2015. (Ex. 11, p. 24; Ex. B, p. 24)

The hearing report states that "Mr. Sanchez was paid $8,178.30 on September 20, 2015, he is owed an additional 7 weeks which was requested to be paid (with interest) on June 1, 2016." (Hearing Rpt., p. 2) It is on this basis that claimant seeks penalty benefits "for non-payment of PPD due & owing from 9-21-15 to 6-1-16." (Id.) Claimant's counsel received an email dated September 29, 2015, from Ms. Venezia, of Liberty Mutual, the workers' compensation insurance carrier, indicating that defendants intended to pay 10 percent of the lower extremity. (Ex. 9, p. 22) The email states that 10 percent of the lower extremity "equates to a lump sum amount of

$8,178.30 (PPD rate is $545.22)." (Ex. 9, p. 22) This is an obvious miscalculation. The amount of $8,178.30 divided by $545.22 is 15, rather than 22 weeks. Defendants agreed in the hearing report, and in their brief that 22 weeks was the correct amount for a 10 percent loss to the lower extremity. (Hearing Rpt. p. 2; Def. Brief p. 4) Defendants argue that this was a good faith error and that claimant's counsel did not notify defendants of the miscalculation. The undersigned notes that claimant's attorney did email defense counsel on October 9, 2015, asking for documentation supporting the basis for the calculation of the payment amount of $8,178.30. (Ex. 11, p. 24)

I note that Dr. Carrier opined that some of the conditions in the knee were chronic, "non-acute changes," and the meniscus tear was, more likely than not, a new injury. (Ex. 6, pp. 16-17) However, Dr. Carrier does not offer an opinion on whether or not the non-acute changes may have been aggravated, lighted-up or made more symptomatic by the work injury. Dr. Hoffman does not appear to address the issue head-on either. He assigned impairment for the medial and lateral meniscectomies, and arguably believes that either the chronic conditions were not aggravated by the work injury, or that they were not aggravated to the point that they are ratable under the AMA Guides, 5th Ed., but it is not clear to the undersigned whether the above assumption is correct. Dr. Kreiter opined that the fall "caused a permanent aggravation of a pre-existing condition," and noted that claimant had not been receiving any medical treatment on the left knee prior to the work injury. (Ex. 3, p. 5) Although Dr. Carrier and Dr. Hoffman may correctly find that Mr. Sanchez had a pre-existing condition, the opinion of Dr. Kreiter is more convincing concerning the aggravation of the pre-existing condition and is consistent with the general lack of symptoms and utter lack of medical treatment concerning the left knee prior to the work injury. This finding is consistent with the record before me, and the claimant's credible testimony at hearing concerning his lack of problems with the knee before this injury and his continued pain and use of the knee brace post-surgery. Therefore, I find the opinion of Dr. Kreiter, which takes into account the aggravation of the underlying condition in addition to the acute meniscus tear and meniscectomies, to be more persuasive. I further find that claimant sustained a 37 percent functional loss to his left lower extremity as a result of the August 4, 2014, work injury. The testimonies of both Mr. Sanchez and his supervisor, Mr. Koch, have also been considered in reaching this conclusion.

CONCLUSIONS OF LAW

The initial disputed issue is extent of permanent impairment.

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).

Under the Iowa Workers' Compensation Act, permanent partial disability is compensated either for a loss or loss of use of a scheduled member under Iowa Code section 85.34(2)(a)-(t) or for loss of earning capacity under section 85.34(2)(u). The extent of scheduled member disability benefits to which an injured worker is entitled is determined by using the functional method. Functional disability is "limited to the loss of the physiological capacity of the body or body part." Mortimer v. Fruehauf Corp., 502 N.W.2d 12, 15 (Iowa 1993); Sherman v. Pella Corp., 576 N.W.2d 312 (Iowa 1998). The fact finder must consider both medical and lay evidence relating to the extent of the functional loss in determining permanent disability resulting from an injury to a scheduled member. Terwilliger v. Snap-On Tools Corp., 529 N.W.2d 267, 272-273 (Iowa 1995); Miller v. Lauridsen Foods, Inc., 525 N.W.2d 417, 420 (Iowa 1994).

While a claimant is not entitled to compensation for the results of a preexisting injury or disease, its mere existence at the time of a subsequent injury is not a defense. Rose v. John Deere Ottumwa Works, 247 Iowa 900, 76 N.W.2d 756 (1956). If the claimant had a preexisting condition or disability that is materially aggravated, accelerated, worsened or lighted up so that it results in disability, claimant is entitled to recover. Nicks v. Davenport Produce Co., 254 Iowa 130, 115 N.W.2d 812 (1962); Yeager v. Firestone Tire & Rubber Co., 253 Iowa 369, 112 N.W.2d 299 (1961).

In this case, Dr. Carrier offered an opinion that the meniscus tear was a new injury and the thinning meniscus, loss of cartilage and flattening of the medial femoral condyle in the medial compartment were pre-existing. Dr. Hoffman, who assigned 10 percent impairment with no discussion or analysis, based this opinion only on the medial and lateral meniscectomies. Neither Dr. Carrier nor Dr. Hoffman directly addressed whether or not the pre-existing condition of Mr. Sanchez's left knee was aggravated by the work injury. Dr. Kreiter opined that the underlying condition was aggravated and accelerated due to the work injury. The evidence supports his conclusion. The lack of prior medical treatment, Mr. Sanchez's work history for more than a decade at the defendant employer without any apparent left knee problems impacting his work or home life, and claimant's testimony support the conclusion that the symptoms that followed the August 4, 2014 work injury, included an aggravation of the underlying condition. Only Dr. Kreiter takes into consideration the aggravation of the pre-existing condition, when he assigned an impairment rating. As stated above, the individual ratings assigned by Dr. Kreiter, when combined under the combined values chart in the AMA Guides, 5th Edition, add up to 37 percent impairment of the left lower extremity. As stated above, I have found that Mr. Sanchez sustained a 37 percent impairment of the left lower extremity. Thirty seven percent of 220 weeks applicable to the lower extremity is 81.4 weeks.

The second issue is whether or not claimant is entitled to reimbursement under Iowa Code section 85.39 for the cost of the independent medical exam arranged by claimant's counsel with Dr. Kreiter.

Iowa Code 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 impairment 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).

Dr. Hoffman, the authorized treating physician, had declared Mr. Sanchez to be at MMI on July 7, 2015 and issued his 10 percent impairment rating on September 7, 2015. The IME appointment with Dr. Kreiter occurred on April 12, 2016.

I conclude that the fee charged by Dr. Kreiter is reasonable and based on the above chronology, that claimant is entitled to reimbursement.

The final issue is whether penalty benefits under Iowa Code section 86.13 are applicable for delay of PPD, from September 21, 2015 through June 1, 2016. As found above, defendants paid a lump sum of $8,178.30 on September 20, 2015, which was 15 weeks of benefits, rather than the 22 weeks that they intended to pay. This was an admitted miscalculation by defendants. In other words, defendants do not argue that the remaining 7 weeks of benefits were not due and offer no reason for the delay other than a good faith error. The additional 7 weeks of benefits had been requested for payment at the time of the hearing, such that the parties stipulated that as of the date of the hearing the claimant had received the 22 weeks of PPD benefits.

Iowa Code section 86.13 states that a reasonable basis for delay or denial of benefits:

> Shall satisfy all of the following criteria:
>
> (1) The excuse was preceded by a reasonable investigation and evaluation by the employer or insurance carrier into whether benefits were owed to the employee.

(2) The results of the reasonable investigation and evaluation were the actual basis upon which the employer or insurance carrier contemporaneously relied to deny, delay payment of, or terminate benefits.

(3) The employer or insurance carrier contemporaneously conveyed the basis for the denial, delay in payment or termination of benefits to the employee at the time of the denial, delay, or termination of benefits.

Iowa Code section 86.13(4)(c)

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. Weekly compensation payments are due at the end of the compensation week. Robbennolt v. Snap-on Tools Corp., 555 N.W.2d 229, 235 (Iowa 1996).

It 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. Covia v. Robinson, 507 N.W.2d 411 (Iowa 1993). An issue of fact is fairly debatable if substantial evidence exists which would support a finding favorable to the employer. Gilbert v. USF Holland, Inc., 637 N.W.2d 194 (Iowa 2001).

If the employer fails to show reasonable cause or excuse for the delay or denial, the commission must impose a penalty in an amount up to 50 percent of the amount unreasonably delayed or denied. Christensen v. Snap-on Tools Corp., 554 N.W.2d 254 (Iowa 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. Robbennolt, 555 N.W.2d at 238.

An error in calculation, even when done without ill will and in good faith, is not a reasonable basis for the delay of weekly benefits under Iowa Code section 86.13. Defendants have not shown a reasonable basis for the delay of 7 weeks of PPD benefits that defendants agree was due. The weekly benefit amount as stipulated by the parties is $545.22. This weekly amount multiplied by 7 weeks is $3,816.54.

The Iowa Supreme Court stated in Robbennolt v. Snap-On Tools Corp., 555 N.W.2d 229, (Iowa 1996) that the commissioner, when assessing penalty should consider: "such factors as the length of the delay, the number of the delays, the information available to the employer regarding the employee's injuries and wages, and the prior penalties imposed against the employer under section 86.13." Robbennolt v. Snap-On Tools Corp., 555 N.W.2d 229, at 238 (Iowa 1996). In this case, the delay was over eight months, and the employer had the information in its possession to make the correct payment and did do so based only on a mathematical error. Also, this insurer's history of penalty with the agency is significant.

The undersigned concludes that claimant is entitled to penalty benefits for the delayed 7 weeks in an amount near 50 percent. The claimant is awarded penalty of One thousand nine hundred and 00/100 dollars ($1,900.00).

ORDER

THEREFORE, IT IS ORDERED:

Defendants shall pay claimant eighty one and 4/10 (81.4) weeks of permanent partial disability benefits for the work injury of August 4, 2014. The commencement date of PPD benefits pursuant to the parties' stipulation is July 7, 2015.

All weekly benefits shall be paid at the rate of five hundred forty five and 22/100 dollars ($545.22) per week.

Defendants shall receive credit for any weekly benefits previously paid.

Accrued benefits shall be paid in a lump sum with interest pursuant to Iowa Code section 85.30 with subsequent reports of injury filed as directed by this agency.

Defendants shall reimburse claimant eight hundred and 00/100 dollars ($800.00) for the cost of claimant's IME with Dr. Kreiter.

Defendants shall pay claimant penalty benefits of one thousand nine hundred and 00/100 dollars ($1,900.00).

Defendants shall pay claimant mileage reimbursement of seven hundred seventy-four and 37/100 dollars ($774.37) as set forth in Claimant's Exhibit 13, pursuant to the parties' stipulation at the time of the hearing.

Defendants shall pay the costs of this matter as set forth in the attachment to the hearing report.

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 9th day of September, 2016.

TOBY J. GORDON
DEPUTY WORKERS'
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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.