BEFORE THE IOWA WORKERS' COMPENSATION COMMISSIONER

ZACH FAIRHURST, Claimant, vs. JENDRO, INC., Employer, and ACCIDENT FUND GENERAL INSURANCE COMPANY, Insurance Carrier, SECOND INJURY FUND OF IOWA, Defendants.	File No. 1641986.01 ARBITRATION DECISION Head Note Nos.: 1108.50, 1402.40, 1803, 2907, 3203

STATEMENT OF THE CASE

Zach Fairhurst, claimant, filed a petition in arbitration seeking workers' compensation benefits from Jendro, Inc., employer and Accident Fund General Insurance Company, insurance carrier and the Second Injury Fund of Iowa as defendants. Hearing was held on November 6, 2020. This case was scheduled to be an in-person hearing occurring in Des Moines. However, due to the outbreak of a pandemic in Iowa, the Iowa Workers' Compensation Commissioner ordered all hearings to occur via video means, using CourtCall. Accordingly, this case proceeded to a live video hearing via CourtCall with all parties and the court reporter appearing remotely.

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.

Zach Fairhurst and Allen Powell were the only witnesses to testify live at trial. The evidentiary record also includes joint exhibits JE1-JE6, claimant's exhibits 1-3, and defendant's exhibits A-E. All exhibits were received without objection. The evidentiary record closed at the conclusion of the arbitration hearing.

The parties submitted post-hearing briefs on December 11, 2020, at which time the case was fully submitted to the undersigned.

ISSUES

The parties submitted the following issues for resolution:

1. The amount of permanent impairment claimant sustained as the result of the March 31, 2017 injury.
2. The proper commencement date for any permanent partial disability benefits owed by the defendant-employer.
3. The amount of permanent impairment claimant sustained as the result of the October 19, 2017 injury.
4. The proper commencement date for any permanent partial disability benefits owed by the defendant-employer.
5. Whether claimant has demonstrated entitlement to benefits from the Second Injury Fund of Iowa. If so, the extent of benefits owed.
6. The proper commencement date for any permanent partial disability benefits owed by the Second Injury Fund of Iowa
7. Whether penalty benefits should be assessed against the defendant-employer.
8. Whether claimant is entitled to full reimbursement of the expenses he incurred in connection with an examination under Iowa Code section 85.39.
9. Assessment of costs.

FINDINGS OF FACT

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

Claimant, Zach Fairhurst, lives in Greene, Iowa. At the time of the injuries in question, he was employed at Jendro where he drove a garbage truck. His duties included driving from house-to-house or business-to-business. Once at each location, he got out of the truck, grabbed the garbage can or dumpster, hooked it up to the truck, emptied it, put the container back, and moved on to the next location. (Testimony)

On March 31, 2017, Mr. Fairhurst was emptying a dumpster at a lumberyard. Typically, he hooks the dumpster to the back of the truck, and it flips up. On this date, the dumpster got stuck and the only way to fix the problem was for Mr. Fairhurst to climb up on the truck and try to force it out. However, as he was trying to release the dumpster, the compactor started compacting. Unfortunately, the compactor grabbed his right hand and crushed his hand from his wrist to his fingers. (Testimony)

Mr. Fairhust went to the emergency room at Floyd County Medical Center. He had a laceration on the palm of his right hand, crush injury, swelling and was only able to move his little finger. There was concerns about tendon injury or compartment

syndrome. He was referred to Mason City Plastic & Reconstructive Surgery, Rene F. Recinos, M.D., who recommended conservative care. (JE1, pp. 1-2; JE2, pp. 4-6)

Mr. Fairhurst continued to treat with Dr. Recinos. He also attended physical therapy for his right hand. Dr. Recinos prescribed an anti-edema glove for Mr. Fairhurst's hand. By June 28, 2017, Mr. Fairhurst had improved, but he continued to have pain in his hand. He was using his anti-edema glove at all times. Dr. Recinos noted that he was making slow, but steady progress. Dr. Recinos felt it was normal to experience aches and pains from the crush injury. He recommended that Mr. Fairhurst continue using the anti-edema glove. Dr. Recinos also recommended some home therapy exercises. Dr. Recinos returned Mr. Fairhurst to unrestricted activities. He was to return in two months. (JE2, pp. 7-16)

On August 30, 2017, Mr. Fairhurst returned to see Dr. Recinos. He reported that his hand pain had diminished. He has resumed all of his activities. Dr. Recinos felt Mr. Fairhurst was doing very well. It was normal for him to still have aches and pains after this type of injury and the fact that the symptoms were slowly improving was reassuring. Mr. Fairhurst had full-finger range of motion and very strong grip strength. Dr. Recinos advised Mr. Fairhurst that he may discontinue his anti-edema glove use as he wishes. Mr. Fairhurst was to follow-up as needed. (JE2, pp. 16-18)

On April 19, 2018, Dr. Recinos authored a missive to defendants. He noted Mr. Fairhurst reached MMI for his right hand crushing injury on April 4, 2018. Dr. Recinos noted that Mr. Fairhurst had been under his care for the crush injury on March 31, 2017. He acknowledged that the issue of permanency was complicated by the fact that Mr. Fairhurst had sustained other injuries, including a radial head fracture and a right thumb fracture. Dr. Recinos made his best attempt to exclude any contributions from the other injuries in the impairment rating he assigned on April 19, 2018. Dr. Recinos utilized the AMA Guides to the Evaluation of Permanent Impairment, Fifth Edition, chapter 16. He assigned 4 percent impairment rating of the right hand due to the crush injury. Under the Guides, 4 percent of the hand is the equivalent of 4 percent of the upper extremity. (JE2, pp. 47-48)

At the request of his attorney, Mr. Fairhust saw F. Manshadi, M.D., for an independent medical evaluation (IME) on August 13, 2019. Dr. Manshadi felt Mr. Fairhurst reached MMI as of August 13, 2019, the date of the IME examination. With regard to the right hand, Dr. Manshadi also cited Chapter 16 of the AMA Guides to the Evaluation of Permanent Impairment, Fifth Edition. He calculated the impairment of each digit, including the right thumb, and arrived at a total of 8 percent impairment of the right hand. In his report Dr. Manshadi discusses all of Mr. Fairhurst's injuries. Although he assigned permanent impairment and opined the impairment was related to the work injuries, he did not clarify how much impairment was attributable to each date of injury. (Cl. Ex. 1, pp. 3-4)

I find Dr. Recinos' functional rating related to the March 31, 2017 injury carries greater weight. When calculating permanent impairment Dr. Recinos specifically noted that he made his best attempt to exclude any contributions from the other injuries. Thus, I conclude that as the result of the March 31, 2017 crush injury, Mr. Fairhurst sustained 4 percent impairment to his right hand. I further conclude that Mr. Fairhurst was released to return to work without restrictions on June 28, 2017 by Dr. Recinos. I find permanent partial disability benefits should commence on June 29, 2017.

Mr. Fairhurst sustained a second injury on October 19, 2017. Mr. Fairhurst was on the back of his truck performing a pre-trip inspection when he fell from the truck and landed on his left elbow, chin, and right thumb. (Testimony)

On the same day as the fall, Mr. Fairhurst went to Charles City Family Health Center, P.C. The assessment was fall 4 feet, contusion with abrasions right thenar region and fracture left proximal radial head. His left arm was placed in a sling. He was to follow-up with Timothy A. Gibbons, M.D., the following week. (JE4, pp. 69-72)

On October 24, 2017, Mr. Fairhurst saw Dr. Gibbons for his left elbow. Dr. Gibbons' impression was left radial head fracture. He recommended conservative treatment. Mr. Fairhurst was to follow-up in three weeks. (JE2, pp. 19-21)

On November 16, 2017, Mr. Fairhurst saw Eric J. Potthoff, D.O., for evaluation of right hand and left elbow pain since falling off a garbage truck. Dr. Potthoff noted the history of his right hand crush injury. Dr. Potthoff's impression was nondisplaced radial head and neck fracture, left elbow and right thumb pain. Dr. Potthoff recommended physical therapy for the left elbow and occupational therapy for the hand. He was to return to light duty work. (JE2, pp. 23-25)

On January 4, 2018, Mr. Fairhurst had an MRI of his hand which revealed a Bennett fracture at the base of the thumb. Dr. Potthoff did not think he had any tears, but if he was still having pain he should see a hand specialist. (JE2, p. 26)

On January 18, 2018, Mr. Fairhurst saw Richard E. Rattay, M.D., for evaluation of his right thumb. Dr. Rattay's impression was closed Bennett's fracture of right thumb. There was no indication for surgery. Dr. Rattay recommended continued therapy and conservative management. In February of 2018, Dr. Rattay also recommended occasional corticosteroid injections at the thumb CMC Joint. Additionally, Dr. Rattay felt that a future thumb surgery was likely, due to progressive post-traumatic arthritis; however, the surgery could be several years down the road. Mr. Fairhurst was to follow-up as needed. (JE2, pp. 27-31)

Mr. Fairhurst saw Michael Lindstrom, D.O., on February 21, 2018. Dr. Lindstrom felt Mr. Fairhurst's right thumb was healed. Dr. Lindstrom opined that Mr. Fairhurst had reached maximum medical improvement (MMI) for his right thumb fracture. He released Mr. Fairhurst with no restrictions. (JE2, pp. 34-37)

On April 4, 2018, Mr. Fairhurst saw Dr. Lindstrom. He was one year post soft tissue crush injury of the right hand. He advised that Mr. Fairhurst may continue to work unrestricted. He was to follow-up as needed. (JE2, pp. 40-42)

On July 5, 2018, Dr. Rattey authored a missive to the defendants. Utilizing the AMA Guides of Evaluation of Permanent Impairment, Fifth Edition, to assign permanent functional impairment. He set forth the specific methodology he used to reach his numbers. Dr. Rattey assigned 13 percent to the right thumb, which is the equivalent of 5 percent to the right hand. He did not assign any permanent restrictions. (JE2, pp. 50-51)

For the right thumb injury, Dr. Manshadi assigned 11 percent impairment of the right thumb which is the equivalent of 4 percent of the right hand or upper extremity. (Cl. Ex. 1, p. 4) Unfortunately, Dr. Manshadi does not indicate how much impairment to the thumb is due to the March 31, 2017 crush injury versus the October 19, 2017 fall injury.

I find that both Dr. Manshadi and Dr. Rattey utilized the AMA Guides of Evaluation of Permanent Impairment, Fifth Edition, to assign permanent functional impairment. For the October 18, 2017 thumb injury, I find Dr. Rattey's functional rating related to the thumb injury to carry greater weight. Dr. Rattey specifically saw Mr. Fairhurst for the October 19, 2017 work injury. However, Dr. Manshadi saw Mr. Fairhurst for the March 31, 2017 and the October 19, 2017 injuries which both involved the right thumb. As noted above, although Dr. Manshadi assigned permanent impairment and felt the impairment was related to the work injuries, he did not clarify how much impairment was attributable to each date of injury. Thus, I give greater weight to the rating of Dr. Rattey. I find Mr. Fairhurst has demonstrated that he sustained 5 percent permanent functional impairment to his right hand as the result of the October 19, 2017 work injury. I further find that Mr. Fairhurst reached MMI for his thumb fracture on February 21, 2018 as opined by Dr. Lindstrom.

We now turn to the left elbow. On October 12, 2018, Dr. Potthoff assigned permanent impairment according to the Fifth Edition of the AMA Guides. Dr. Potthoff cited the specific sections, pages, and figures and found there was no ratable impairment for the left elbow injury due to the work injury. (JE2, p. 55)

Dr. Manshadi also evaluated Mr. Fairhurst's left elbow for permanent impairment. He stated, that he used pages 471-474 of The Guides and assigned 2 percent impairment of the left upper extremity. He did not provide any additional analysis or explanation. (Cl. Ex. 1, p. 4)

A review of pages 471-474 of The Guides reveals that these pages address elbow motion impairment. Unfortunately, Dr. Manshadi does not explain how he was able to assign any impairment to Mr. Fairhurst's left elbow based on the measurements he set forth on page 3 of his report. With regard to the left elbow, I find Dr. Potthoff assigned permanent impairment according to the Guides to the Evaluation of

Permanent Impairment, published by the American Medical Association. While both physician reference the AMA Guides, Fifth Edition, Dr. Potthoff provides a more in-depth explanation as to how he used The Guides to reach his impairment rating. Therefore, I give Dr. Potthoff's rating greater weight and accept the impairment rating offered by Dr. Potthoff. I find claimant proved zero percent permanent functional impairment of the left upper extremity as a result of the October 19, 2017 work injury.

As such, I find that he has demonstrated that he sustained permanent disability to his right hand as the result of the October 19, 2017 injury. I further find that Mr. Fairhurst reached MMI for his thumb fracture on February 21, 2018 as opined by Dr. Lindstrom. I further conclude that Mr. Fairhurst failed to demonstrate that he sustained any permanent disability that extends beyond his right hand as the result of the October 19, 2017 work injury.

We now turn to the issue of penalty. Claimant seeks 50 percent penalty on the 7.857 weeks of permanent partial disability benefits paid by the defendant employer for Mr. Fairhurst's right hand impairment. Claimant asserts there was an unreasonable delay in the payment of these benefits. Specifically, claimant argues that on February 21, 2018, Dr. Rattay placed claimant at MMI. The doctor stated that if a rating is requested, the rating could be based on these notes. (JE2, p. 37) Claimant argues that based on this clinical note, it was obvious that Mr. Fairhurst had sustained permanent disability. Defendants did not make any inquiry regarding permanent impairment until April 25, 2018; claimant argues this resulted in an unreasonable delay. (JE2, p. 50) Although Dr. Rattay saw Mr. Fairhurst on February 21, 2018, it is not known when the clinical notes were ready and made available to the parties. There is an inherent administrative delay from the time a physician dictates his notes until the time those notes are available to the parties. I find that any delay in requesting the impairment rating in this case is not unreasonable.

Additionally, claimant argues that even once defendants received the impairment rating from Dr. Rattay's office, there was an unreasonable delay in issuing the payment of the permanent impairment rating. Dr. Rattay authored his impairment rating on July 5, 2018. It appears the impairment rating was faxed on July 10, 2018. The defendants issued the first check for permanent partial disability benefits the next day, on July 11, 2018. I find that there was no unreasonable delay by the defendants in issuing the check for permanent disability benefits.

Claimant also seeks penalty on the basis that defendants "failed to conduct an ongoing investigation after receipt of Dr. Manshadi's IME report, which indicated that additional PPD was owed for the 10/19/17 work injury." (Claimant's brief, p. 7) At that point, defendants had already obtained an impairment rating from at least one other physician. Thus, I find penalty benefits are not appropriate in this matter.

Claimant is seeking reimbursement for the IME of Dr. Manshadi in the amount of $1,800.00. Defendants do not argue that the prerequisites of section 85.39 were not met. Rather, defendants argue that the amount charged by Dr. Manshadi is not

reasonable. Defendants point out that they only paid $500.00 to obtain an impairment rating. However, the impairment rating they obtained was from a treating physician who was already familiar with the patient and his treatment history. Additionally, Dr. Manshadi's IME was for both dates of injury. I find that the fees charged by Dr. Manshadi are reasonable. Defendants shall reimburse claimant in the amount of $1,800.00 for the IME of Dr. Manshadi.

CONCLUSIONS OF LAW

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).

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)-(u) or as an unscheduled injury pursuant to the provisions of section 85.34(2)(v). 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).

Iowa Code section 85.34(x) permanent disabilities states:

> x. In all cases of permanent partial disability described in paragraphs "a" through "u", or paragraph "v" when determining functional disability and not loss of earning capacity, the extent of loss or percentage of permanent impairment shall be determined solely by utilizing the guides to the

> evaluation of permanent impairment, published by the American medical association, as adopted by the workers' compensation commissioner by rule pursuant to chapter 17A. Lay testimony or agency expertise shall not be utilized in determining loss or percentage of permanent impairment pursuant to paragraphs "a" through "u", or paragraph "v" when determining functional disability and not loss of earning capacity.

Iowa Code section 85.34 (x).

This agency has adopted the Guides to the Evaluation of Permanent Impairment, Fifth Edition, published by the American Medical Association for determining the extent of loss or percentage of impairment for permanent partial disabilities. See 876 IAC 2.4.

Based on the above findings of fact, I conclude Mr. Fairhurst has demonstrated by a preponderance of the evidence that he sustained 4 percent impairment to his right hand as the result of the March 31, 2017 work injury. Permanent partial disability to a hand is to be based on 190 weeks of compensation. See Iowa Code section 85.34(2)(l). Thus, I conclude Mr. Fairhurst has demonstrated entitlement to 7.6 weeks of permanent partial disability benefits as the result of the March 31, 2017 crush injury. These benefits shall commence on June 29, 2017.

We now turn to the October 19, 2017 work injury. Based on the above findings of fact, I conclude Mr. Fairhurst has demonstrated by a preponderance of the evidence that he sustained 5 percent impairment to his right hand as the result of the October 19, 2017 work injury. I further conclude that Mr. Fairhurst has failed to demonstrate by a preponderance of the evidence that he sustained any permanent disability that extends beyond his right hand as the result of the October 19, 2017 work injury. Permanent partial disability to a hand is to be based on 190 weeks of compensation. See Iowa Code section 85.34(2)(l). Thus, I conclude Mr. Fairhurst has demonstrated entitlement to 9.5 weeks of permanent partial disability benefits as the result of the October 19, 2017 work injury. These benefits shall commence on February 21, 2018.

Next, we turn to Mr. Fairhurst's claim against the Second Injury Fund of Iowa.

Section 85.64 governs Second Injury Fund liability. Before liability of the Fund is triggered, three requirements must be met. First, the employee must have lost or lost the use of a hand, arm, foot, leg, or eye. Second, the employee must sustain a loss or loss of use of another specified member or organ through a compensable injury. Third, permanent disability must exist as to both the initial injury and the second injury.

The Second Injury Fund Act exists to encourage the hiring of handicapped persons by making a current employer responsible only for the amount of disability related to an injury occurring while that employer employed the handicapped individual as if the individual had had no preexisting disability. See Anderson v. Second Injury Fund, 262 N.W.2d 789 (Iowa 1978); 15 Iowa Practice, Workers' Compensation, Lawyer, Section 17:1, p. 211 (2014-2015).

The Fund is responsible for the industrial disability present after the second injury that exceeds the disability attributable to the first and second injuries. Section 85.64. Second Injury Fund of Iowa v. Braden, 459 N.W.2d 467 (Iowa 1990); Second Injury Fund v. Neelans, 436 N.W.2d 355 (Iowa 1989); Second Injury Fund v. Mich. Coal Co., 274 N.W.2d 300 (Iowa 1970).

In the present case, I conclude that Mr. Fairhurst demonstrated by a preponderance of the evidence that he sustained permanent partial disability to his right hand as the result of the March 31, 2017 work injury. Additionally, I found he sustained permanent partial disability to his right hand as the result of the October 19, 2017 work injury. Based on the above findings of fact, I conclude that Mr. Fairhurst failed to demonstrate that he sustained any permanent partial disability to his left elbow. I conclude that he failed to demonstrate that he sustained any permanent loss to any member beyond his right hand. Therefore, I conclude that Mr. Fairhurst has failed to prove that he sustained impairment to more than one scheduled member. Mr. Fairhust has failed to meet the statutory requirements necessary to prove entitlement to any benefits from the Fund. Because Mr. Fairhurst has failed to show entitlement to any benefits from the Fund, all other issues regarding his claim for benefits from the Fund are rendered moot.

We now turn to the issue of penalty benefits. 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. Robbennolt v. Snap-on Tools Corp., 555 N.W.2d 229 (Iowa 1996). Delay attributable to the time required to perform a reasonable investigation is not unreasonable. Kiesecker v. Webster City Meats, Inc., 528 N.W.2d 109 (Iowa 1995).

Claimant seeks penalty for unreasonable delay in permanent partial disability benefits. Claimant also seeks penalty benefits for failure to conduct an ongoing investigation. Based on the above findings of fact, I conclude that any delay in requesting the impairment rating in this case is not unreasonable. I further conclude there was no unreasonable delay by the defendants in issuing the check for permanent disability benefits. I find there was not an unreasonable delay or denial of benefits. Thus, I conclude penalty benefits are not appropriate in this case.

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.

Based on the above findings of fact, I conclude that the fees charged by Dr. Manshadi are reasonable. Defendants shall reimburse claimant in the amount of eighteen hundred and no/100 dollars ($1,800.00) for the IME of Dr. Manshadi.

Finally, claimant is seeking an assessment of costs in the amount of $100.00 for the filing fee. Costs are to be assessed at the discretion of the Iowa Workers' Compensation Commissioner or the deputy hearing the case. 876 IAC 4.33. I find that claimant was somewhat successful in his case. Thus I exercise my discretion and assess costs against the defendant employer. I find that the $100.00 filing fee is an appropriate cost under 876 IAC 4.33(7). Defendants are assessed costs in the amount of $100.00.

ORDER

THEREFORE, IT IS ORDERED:

Claimant shall take nothing from the Second Injury Fund of Iowa as the result of these proceedings.

All weekly benefits shall be paid at the stipulated rate of five hundred fourteen and 42/100 dollars ($514.42).

With regard to the March 31, 2017 work injury, defendant-employer shall pay seven point six (7.6) weeks of permanent partial disability benefits commencing on June 29, 2017.

Defendant-employer shall be entitled to credit for all weekly benefits paid to date.

With regard to the October 19, 2017 work injury, defendant-employer shall pay nine point five (9.5) weeks of permanent partial disability benefits commencing on February 21, 2018.

Defendant-employer shall be entitled to credit for all weekly benefits paid to date.

Defendant-employer shall pay accrued weekly benefits in a lump sum together with interest at the rate of ten percent for all weekly benefits payable and not paid when due which accrued before July 1, 2017, and all interest on past due weekly compensation benefits accruing on or after July 1, 2017, shall be payable at an annual rate equal to the one-year treasury constant maturity published by the federal reserve in the most recent H15 report settled as of the date of injury, plus two percent. See Deciga Sanchez v. Tyson Fresh Meats, Inc., File No. 5052008 (App. Apr. 23, 2018) (Ruling on Defendants' Motion to Enlarge, Reconsider or Amend Appeal Decision re: Interest Rate Issue).

Defendant-employer shall reimburse claimant for the full amount of the IME.

Defendant-employer shall reimburse claimant costs as set forth above.

Defendant-employer 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 _21st_ day of May, 2021.

ERIN Q. PALS
DEPUTY WORKERS'
COMPENSATION COMMISSIONER

The parties have been served, as follows:

Charles Showalter (via WCES)

Benjamin Roth (via WCES)

Laura Ostrander (via WCES)

Tonya Oetken (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.