

BEFORE THE IOWA WORKERS' COMPENSATION COMMISSIONER

SUSAN PEYTON,

FILED

Claimant,

AUG 10 2015

vs.

WORKERS COMPENSATION

File No. 5018230

PEPSI BEVERAGES COMPANY f/k/a
PEPSI AMERICA,

REVIEW-REOPENING

Employer,

DECISION

and

OLD REPUBLIC INSURANCE,

Insurance Carrier,
Defendants.

Head Note No.: 1803

STATEMENT OF THE CASE

Nancy Peyton, claimant, has filed a petition in arbitration and seeks workers' compensation from Pepsi America, employer and Old Republic Insurance, insurance carrier, defendants.

This matter came on for hearing before deputy workers' compensation commissioner, Jon E. Heitland, on April 29, 2015 in Des Moines, Iowa. The record in the case consists of claimant's exhibits 1 through 3; defense exhibits A through G; as well as the testimony of the claimant.

ISSUES

The parties presented the following issues for determination:

Whether the claimant is entitled to temporary total disability or healing period benefits during a period of recovery.

The extent of the claimant's entitlement to permanent partial disability benefits.

Whether there has been a change of condition caused by the work injury not contemplated at the time of the prior arbitration decision which has increased claimant's industrial disability, and if so, the extent thereof.

FINDINGS OF FACT

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

This is an action in review-reopening for an injury occurring on October 4, 2002. Claimant was awarded industrial disability of 25 percent following a hearing on February 16, 2011. The arbitration decision is contained in Defendant's Exhibit G, pages 48-50.

In this hearing, claimant, Susan Peyton, testified she lives in Wilburn, Georgia. She has lived there since November 2011. She is 50 years old. Her education consists of a high school diploma, and later, online education. She received a bachelor's degree in business, with some medical classes as well, in 2013 through her online studies. (Claimant's Exhibit 2, page 30) She was in the property management business, and she sought a degree to help her in that field. She has never worked in the medical field.

Her work experience includes driving a truck for Pepsi, which was her occupation when she was injured. She also has experience in real estate and property management. (Cl. Ex. 2, pp. 31-34) She has always done physical work, which she enjoys. After her injury, it became apparent after a few years she could not continue doing physical work. A friend got her into property management work. This work involves meeting clients, showing them properties, cleaning the apartments, helping residents with various issues, supervising the maintenance team, etc. The primary physical requirements are walking the property, going up and down stairs, making sure all debris is cleared on the pathways, etc. She also did a lot of paperwork.

For the past year or so, these physical tasks have become more difficult. Climbing stairs, walking with clients, and sitting at a desk a long time have all caused problems for her.

Her arbitration hearing for this injury was in February 2011. Prior to her injury, she was able to do her duties with only minimal physical problems.

She last worked as a property manager in Atlanta in September of 2014. She worked in a high rise, and she had to use the stairs several times per day. She had to do a lot of walking through the building. In the past year, her condition from her injury has made it much harder to perform her duties. In August 2014, a new regional manager was installed, and she was very demanding and added duties such as cleaning out closets and other tasks claimant could not do.

Claimant has conducted a job search, which ended January 31, 2015. (Cl. Ex. 3) She made three work contacts per week. This was mandatory under Georgia unemployment benefits laws. However, she did not feel she could do any of those jobs. She does not feel she can do any full time work now with her pain, although she hopes her current treatment will help with that.

She applied for Social Security Disability benefits in February 2015. She based her claim on her back injury, which radiates into her hips. She has a lot of pain in her hips currently. She treats for that condition now. This is the only condition that contributes to her disability. She has not received a ruling on her application.

At the time of her original injury, she was driving a truck for Pepsi. She loaded a case of pallets into her truck and her back popped. She had surgery with Chad Abernathy, M.D., and later another surgery in Florida with Charles Wingo, M.D. She was placed at maximum medical improvement (MMI) in August 2007.

In November 2011, claimant moved from Tallahassee, Florida, to Georgia. Claimant sought treatment at Northside Pain Clinic in Georgia on April 26, 2013 for her low back. The insurer has paid for her treatment to date. She has treated there about two years.

She underwent epidural injections, which did not help for very long. The most recent injection was April 15, 2015, just before the hearing. She also, at the time of the injury, began using marijuana as a method of pain control, and continued to use it daily until January of 2015. She had to stop using it when she was prescribed a stronger narcotic medication for her pain. She is currently on Tramadol. She goes back two days after the hearing for her next appointment.

In 2007, Dr. Wingo advised her to get exercise, such as walking and swimming. She goes to the gym and uses the treadmill but it has gotten harder to do. She walks at the gym and uses a treadmill, where she can hang on and not trip or fall, which is a problem when she walks outdoors.

Today she still has pain from her incision site from her original surgery. She now has pain in her hips and her knees. She relates her knee pain to the exercises she has had to do for her back injury, although she has not been told that by a doctor. Her right leg has bothered her since 2007. Dr. Wingo told her the nerve would grow back and the pain would lessen but it has not. Her left leg pain goes down to her knee; her right leg pain goes down to her toes.

Her hip pain, and her left leg pain, is new since the prior hearing. They developed within the last year. Her other symptoms that were present at the time of the last hearing are more severe. She is not sure if she had left leg pain at time of last hearing. She has always had right leg pain. She thinks she has had hip pain since the last hearing. Today, walking and driving for very long cause her pain. Walking up stairs is harder than it was.

Her plans for the future are uncertain. She would like to return to work, but she has to get the pain under control first. She would look for work in the management field, as she went to school for that and she enjoys it.

On cross-examination, she agreed she had undergone two back surgeries at the time of the prior hearing, the second one a fusion surgery. Dr. Wingo found her at MMI after that surgery, in August 2007. She had a 30 pound lifting restriction, which continues today. Those restrictions have not changed or been modified by any physician. No physician at Northside has given her any new restrictions.

Since the last hearing, her weight has decreased by 40 pounds. She moved to Florida in 2003. Around 2004, she got into the field of property management. By 2006 she was earning \$13.00 per hour. Around 2007 to 2009, she advanced in the property management field and began doing multi-family management, which paid her about \$36,000.00 to \$38,000.00 per year. She was then off work from October 2009 to June 2010, while she looked for work. She found a job at Harbor Management in June 2010, again earning about \$36,000.00 per year. Shortly before the 2011 hearing, she was no longer working there and was unemployed at the time of the hearing. She is unemployed today. She agreed property management has its ups and downs and at times it was hard to find work in that field.

She later obtained her job with HSI, which paid about \$40,000.00 per year plus benefits. During this time she began going to school again, about 20 hours per week in addition to the 40 hours she worked for HSI. In late 2014, claimant resigned her position at HSI. She did not like the management style of the new regional manager who had started in August 2014. Claimant stated the work the new manager gave her was beyond her formal work restrictions, and she advised the new manager of that. Claimant asserts she told her physicians about her increase in symptoms, which included her legs "jumping." She began to notice her increase in pain about April 2014. She reported her hip pain to her doctors in late 2014, which has become very intense over the last six months before this hearing.

For her knees, she went to an orthopedic doctor who told her, after taking x-rays, her knees were "coming apart," and she should wear braces when she walks.

She agreed she at first denied using marijuana when her doctors asked. A drug screen showed positive results for THC. She told her doctors it helped her pain. In September 2013, claimant opted for marijuana for pain control rather than a narcotic medication. It was not prescribed marijuana. Some of her employers since the 2011 hearing conducted drug screens. Claimant would quit using marijuana prior to the drug tests. Marijuana is not legal in Georgia. HSI, her last employer, administered a drug test and claimant passed.

Her business degree had a concentration in health administration. At the prior hearing she was earning \$38,000.00, and she thought with her 4 year college degree she could earn closer to \$60,000.00. The online university does provide job placement assistance and this is available to claimant. She agreed the type of job she would obtain with her degree would be a desk job. She also agreed this would not violate her lifting restriction of 30 pounds or her other restrictions.

Her tax returns show she was making \$36,000.00 to \$40,000.00 over the last 4 years. She applied for unemployment benefits in October 2014. She has applied for jobs, but has not been offered a position. She has no current job leads. If she were offered a job now, she would not accept it as her pain is not resolved. She applied for positions to maintain her unemployment benefits. The jobs were all in the property management field. She has a resume which is circulating on online job sites, as required by Georgia unemployment benefits regulations.

She daily spends 30 minutes on the treadmill, and does some weight lifting with her arms. At the prior hearing, she reported extreme pain in her right leg, and it is still present. She testified at that time her right leg caused her to limp. She has not been prescribed a cane or brace for her back, but knee braces were suggested. She agreed it was possible she was reporting right hip pain at the prior hearing. She does not plan to go back to marijuana for pain relief.

On re-direct examination, she stated she cannot run, and it has been more than 5 years since she has done so. Her 30 pound restriction in 2007 was appropriate, and she feels she was able to lift 30 pounds then. Since then, however, she does not think she can even lift 10 pounds today. Her arms are very weak. If she lifts something, it is hard for her to hold on to it.

Prior to the arbitration hearing, claimant had undergone a surgical hemi-laminectomy at L5-S1 in 2002, and then on January 6, 2007 she underwent a laminectomy and fusion at L4-5 and L5-S1 with Dr. Wingo. He found her to be at MMI on January 28, 2008 and assigned a 15 percent whole person impairment rating, as well as a permanent restriction of avoiding lifting over 30 pounds more than occasionally.

At the prior hearing, claimant testified that the second surgery had greatly improved her low back pain, but she continued to have pain in her left leg.

Claimant had earned from \$36,000-\$40,000 annually in Florida as a property manager. However, she lost that job due to alleged misconduct. She later obtained an online degree in business and health administration from American Intercontinental University. (Defendants' Ex. D, p. 22) Claimant testified at the prior hearing that after the second surgery she continued to have a lot of issues with her right leg, including extreme pain. (Def. Ex. D, p. 28) She also stated she walked with a limp. She hoped to find a job in a medical office that would pay more than she had been earning. At that time she could walk a mile around a lake near her home. (Def. Ex. D. p. 51)

Since the prior hearing and award, claimant has sought additional medical treatment. Claimant was seen for a spine evaluation by John J. Moss, M.D., at Northside Hospital in Georgia on April 26, 2013, with complaints of low back pain, radiating into the right leg. (Cl. Ex. 1, p. 1) X-rays taken in August 2013, showed evidence of her surgery at L4-5 and L5-S1, as well as bone graft material at L5-S1, with disc space narrowing at L5-S1. (Cl. Ex. 1, p. 5)

An MRI conducted on May 7, 2013, showed postsurgical changes, status post L4-5 and L5-S1 transpedicle fusion with associated degenerative disc disease. (Cl. Ex. 1, p. 6) Claimant underwent a caudal epidural steroid injection on May 17, 2013. However, it provided no relief. (Cl. Ex. 1, p. 7) On June 11, 2013, she had a second injection, but again, little or no relief.

Claimant was seen by Chitra Ramasubbu, M.D., on June 28, 2013. (Cl. Ex. 1, p. 8) Again, she reported low back pain with right leg radiation, and right foot weakness. A scheduled third injection was cancelled. Claimant was given Tramadol and her Cymbalta was increased. On July 26, 2013, claimant was seen by Justin Ford, M.D., at Northside Hospital Pain Center. (Cl. Ex. 1, p. 10) At these visits, claimant reported pain of 7 on a scale of 1 to 10, but at times 10 out of 10 and unbearable. On August 26, 2013, claimant was offered a spinal cord stimulator, but she was reluctant to try it. (Cl. Ex. 1, p. 13)

On September 24, 2013, claimant returned to Northside Hospital and saw Dr. Moss. (Cl. Ex. 1, p. 16) It was noted claimant had a positive drug test for marijuana. At this time claimant complained of bilateral leg pain, which she rated as 4 out of 10. However, a second drug test was again positive of marijuana. Claimant stated the marijuana eases her pain. Claimant was being treated with Methadone and had to decide whether to give that up or give up the marijuana. Claimant was undecided so she was put on a Methadone weaning regimen.

She returned to Dr. Moss on January 31, 2014. (Cl. Ex. 1, p. 19) Her medications were found to be helping, and her dosage of Gabapentin was increased.

On August 14, 2014 claimant was seen again by Dr. Ramasubbu. (Cl. Ex. 1, p. 20) She reported pain of 4 or 5 on a scale of 10.

On January 7, 2015, claimant was seen by Jada Reese, M.D. (Cl. Ex. 1, p. 22) She reported pain of 5 out of 10, and bilateral buttock pain with radiation into the bilateral lower extremities.

On April 1, 2015, the claimant saw Dr. Ramasubbu and reported an increase in bilateral buttock pain and lower extremity pain. (Cl. Ex. 1, p. 24) She reported pain of 8 out of 10, and indicated she had stopped using marijuana and wished to resume her pain medication. She said her bilateral buttock pain, which radiates into both legs down into her thighs and calf area, had become worse and is experienced 100 percent of the day. Sitting, lying down or walking for extended periods aggravated the pain. On April 15, 2015, the claimant underwent bilateral sacroiliac injections. (Cl. Ex. 1, p. 27)

In her deposition for this hearing, conducted April 10, 2015, claimant agreed the permanent restrictions of Dr. Wingo have not been changed. She was having issues with walking up and down stairs and sitting behind a desk for hours, although no doctor has formally restricted her for this. She did not know if the formal 30 pound lifting restriction would preclude employment in the health care administration field, but she

felt she would not be able to perform work in that area at all, as she would have trouble with walking, pushing beds, or sitting behind a desk for long time. (Def. Ex. C, pp. 8-18)

Claimant obtained her online bachelor's degree in June 2013, but she did not take advantage of job placement services that were offered because she was only seeking to advance herself in the property management field where she already worked. (Def. Ex. C, p. 11) She also is not looking for a job until her pain is relieved. (*Id.*) Claimant's last job paid about \$40,000.00 per year, but claimant had a conflict with a new manager and left.

While working there, she worked 40 hours per week, plus spent 20 hours on her coursework for her degree. (Def. Ex. C, p. 12) She only looked for jobs in Georgia long enough to comply with the requirements for receiving unemployment benefits.

She continues to exercise in the form of walking on a treadmill, and swimming. (Def. Ex. C, pp. 14-15, at p. 29 Deposition) She currently uses Flexeril, Neurontin, Cymbalta, and Tramadol. (Def. Ex. C, p. 15) She has lost 40 pounds since the prior hearing. (Def. Ex. C, p. 16) She has lost 40 pounds since the prior hearing. (Def. Ex. C, p. 16)

At the time of the first hearing, claimant had low back and right leg pain complaints. Now, she has low back, and bilateral leg pain. (Def. Ex. C, p.15) Claimant testified in 2002 her left leg was affected, and then it was her right leg after the second surgery, and more recently, beginning in 2014, again includes the left side as well. (Def. Ex. C, p. 16)

Materials from American Intercontinental University for the Bachelor of Business Administration-Health Care Management degree claimant obtained shows a growth in job opportunities in this field due to the Affordable Care Act and an aging population, with a median annual salary for medical and health services managers of \$88,580.00 in May 2012. The skills required are within claimant's restrictions. (Def. Ex. F, pp. 40-47)

CONCLUSIONS OF LAW

The first issue is whether there has been a change of condition caused by the work injury not contemplated at the time of the prior arbitration decision which has increased claimant's industrial disability, and if so, the extent thereof.

Upon review-reopening, claimant has the burden to show a change in condition related to the original injury since the original award or settlement was made. The change may be either economic or physical. Blacksmith v. All-American, Inc., 290 N.W.2d 348 (Iowa 1980); Henderson v. Iles, 250 Iowa 787, 96 N.W.2d 321 (1959). A mere difference of opinion of experts as to the percentage of disability arising from an original injury is not sufficient to justify a different determination on a petition for review-reopening. Rather, claimant's condition must have worsened or deteriorated in a manner not contemplated at the time of the initial award or settlement before an award

on review-reopening is appropriate. Bousfield v. Sisters of Mercy, 249 Iowa 64, 86 N.W.2d 109 (1957). A failure of a condition to improve to the extent anticipated originally may also constitute a change of condition. Meyers v. Holiday Inn of Cedar Falls, Iowa, 272 N.W.2d 24 (Iowa App. 1978).

The parties stipulated any new benefits would commence at the end of the payout of the prior award of benefits.

Since the prior arbitration hearing, claimant states she has developed more back and right leg pain, as well as new pain radiating from the center of her back and down her left leg. She asserts that as a result, her treatment needs have increased, and her ability to engage in activities of daily living has further diminished. She feels she can no longer do work duties she could at the time of the prior hearing.

In her deposition prior to the arbitration hearing, claimant testified she had pain in her lower back that radiated to her right hip and down her left leg. (Def. Ex. D, p. 30) She stated at the time her right leg would go numb, but she was still able to walk. Now, she has testified she still has pain in these areas, but the pain is worse than before. (Def. Exhibit C, p. 15) She stated her foot still goes numb, and she has less sensation in her legs.

Claimant related she now has left-sided symptoms she did not have before, in the form of pain across her low back that goes outward toward her hips and down her legs. (Def. Ex. C, pp. 15-16)

Because of this increase in symptoms, she sought further medical treatment. In April 2013, she was seen at Northside Hospital Pain Clinic. She had pain in her lower back and right leg she rated as 4 to 9 on a scale of 10. (Cl. Ex. 1, p. 4) In August 2013, she rated her pain as 6 to 10. She was beginning to experience symptoms in her left leg as well. The arbitration decision noted left leg symptoms in 2011, but claimant asserts this is an error, as claimant's testimony and medical records indicate only right-sided symptoms. At another appointment she reported an increase in bilateral buttock pain as well as lower extremity pain, which she rated as 7 or 8 out of 10. (Cl. Ex. 1, p. 24)

Claimant lived in Florida at the time of the arbitration hearing. She later moved to Georgia in November 2011. She did not require further treatment for her back until April 2013.

At the time of the arbitration hearing, she was on two medications for pain, Mobic and Cymbalta. (Def. Ex. D, p. 30) Since seeking further treatment in April 2013, she now takes Flexeril, Neurontin, Cymbalta, and Tramadol. (Cl. Ex. 1, p. 25) At her prior hearing in 2011, she had not received an injection for pain for five years, but since April 2013, she has had two epidural steroid injections and one bilateral sacroiliac (SI) joint injection. (Cl. Ex. 1, pp. 3, 7; pp. 25-27)

Before the prior hearing, claimant was working full time as a property manager. The job involved walking, standing and stair climbing. She was able to perform those duties at the time of the prior hearing. However, she lost that job due to reasons unrelated to her work injury just prior to the 2011 hearing. A month after that hearing, claimant found a new job in property management. (Def. Ex. C, p. 11) Claimant resigned that job in September 2014 after experiencing increased pain from the walking and stair climbing involved, and conflicts with her new supervisor.

She has not worked since then. She has looked for jobs but she does not think she can handle full time work, particularly in property management due to the walking, stairs, and sitting behind a desk for hours. She applied for Social Security Disability benefits but has not received a determination of eligibility.

Claimant's work restrictions have not changed since the prior hearing. She is not to lift more than 30 pounds occasionally. Her ratings of impairment have not changed since the prior hearing. No doctor has told her she cannot now work. Claimant acknowledges she has not sought a job in either her old profession of property management, or her new profession based on her new bachelor's degree, due to her own self-perceived inability to work with the pain she has.

Initially, claimant had low back pain with radiation into her left leg, after her first surgery. Then, after her second surgery, she reported low back pain with radiation into the right leg, and most of her doctor visits thereafter mention right leg radiation. She testified that sometime in 2014, she experienced an increase in pain, in her low back, and her right leg, and new pain in her left leg. However, her doctor's notes do not reflect that, although she insists she reported it to them.

There is no medical evidence of any deterioration in her condition. MRI evidence merely confirms the fact she underwent prior surgeries. There is no recommendation for further surgery.

Claimant was earning \$40,000.00 per year in the property management field. She lost that job, which she attributes to a new manager expecting her to perform physical tasks that were increasing her pain. Claimant then obtained a bachelor's degree in a field where she could have earned much more than before, up to twice as much. But she has not pursued any work in either field, as she has concluded she cannot work due to her pain. No doctor has told her that. No vocational expert offers an opinion she cannot work. She has not attempted work in either field and found she cannot perform the duties; rather, she has concluded it is not even worth trying.

It cannot be concluded from this record that claimant is incapable of working. Her lifting restriction is not severe. More importantly, it has not increased since the last hearing. Her symptoms are for the most part the same, with the addition of left leg symptoms and claimant's testimony that her right leg and low back pain have increased since the last hearing. This is of course impossible to verify, as pain is a subjective

experience. The claimant's testimony was credible. She sincerely believes her pain prevents her from working at all.

But claimant bears the burden of proof to show she has suffered an increase of disability since the prior award. Her subjective belief she has stands uncorroborated in this record. No doctor says she cannot work. No doctor says her impairment has increased. No doctor has changed her lifting restriction. No vocational evidence indicates the prior award is no longer appropriate. Claimant cannot point to any job attempts that show her prior award is now inadequate.

On the other hand, the medical records do corroborate that claimant sometime in 2014 began reporting left leg pain in addition to her low back and right leg complaints. Although she had initially reported left leg pain, by the time of the prior arbitration decision, her symptoms were mostly in the low back and into the right leg. So one thing that has changed since the prior decision is the onset, or re-appearance, of left leg pain. Claimant also credibly asserts her low back and right leg pain have increased in intensity. This constitutes a change of condition, and review-reopening is appropriate.

The next issue is the extent of the claimant's entitlement to permanent partial disability benefits.

Since claimant has an impairment to the body as a whole, an industrial disability has been sustained. Industrial disability was defined in Diederich v. Tri-City R. Co., 219 Iowa 587, 258 N.W. 899 (1935) as follows: "It is therefore plain that the legislature intended the term 'disability' to mean 'industrial disability' or loss of earning capacity and not a mere 'functional disability' to be computed in the terms of percentages of the total physical and mental ability of a normal man."

Functional impairment is an element to be considered in determining industrial disability which is the reduction of earning capacity, but consideration must also be given to the injured employee's age, education, qualifications, experience, motivation, loss of earnings, severity and situs of the injury, work restrictions, inability to engage in employment for which the employee is fitted and the employer's offer of work or failure to so offer. McSpadden v. Big Ben Coal Co., 288 N.W.2d 181 (Iowa 1980); Olson v. Goodyear Service Stores, 255 Iowa 1112, 125 N.W.2d 251 (1963); Barton v. Nevada Poultry Co., 253 Iowa 285, 110 N.W.2d 660 (1961).

Compensation for permanent partial disability shall begin at the termination of the healing period. Compensation shall be paid in relation to 500 weeks as the disability bears to the body as a whole. Section 85.34.

Although claimant has shown a change of condition since the prior award, she has not shown much change. As noted above, much of her current disability exists more in her mind than in her body. She has concluded her pain prevents her from working, but she has not attempted any jobs to find out if that is true. She did not take advantage of job placement services for the same reason. Claimant has shown poor

motivation to find substitute work, although it is true that it is difficult for anyone to work while in pain.

But the prior award took much of this into account. This decision cannot re-litigate the question of how much disability claimant suffered as a result of her work injury. It can only adjudicate whether her disability, as determined in the prior arbitration decision, has increased, and if so, how much.

It is concluded, based on the record presented, that with the addition of left leg pain symptoms since the prior award, and with claimant's accepted testimony her low back and right leg symptoms have increased in intensity, claimant has suffered an additional 20 percent of industrial disability above and beyond the 25 percent awarded in the arbitration decision.

ORDER

THEREFORE IT IS ORDERED:

Defendants shall pay unto the claimant one hundred (100) weeks of permanent partial disability benefits at the rate of three hundred fifty-four and 96/100 dollars (\$354.96) per week from August 20, 2007.

Defendants shall pay accrued weekly benefits in a lump sum.

Defendants shall pay interest on unpaid weekly benefits awarded herein as set forth in Iowa Code section 85.30.

Defendants shall be given credit for benefits previously paid.

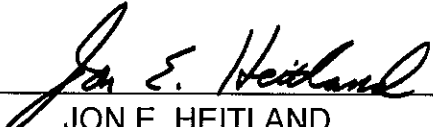
Defendants shall pay the claimant's prior medical expenses submitted by claimant at the hearing.

Defendants shall pay the future medical expenses of the claimant necessitated by the work injury.

Defendants shall file subsequent reports of injury as required by this agency pursuant to rule 876 IAC 3.1(2).

Costs are taxed to defendants.

Signed and filed this 10th day of August, 2015.



JON E. HEITLAND
DEPUTY WORKERS'
COMPENSATION COMMISSIONER

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JEH/srs

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.