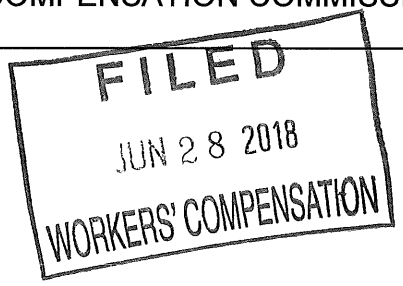
BEFORE THE IOWA WORKERS' COMPENSATION COMMISSIONER

MYNOR ALEXANDER MENDOZA FERREZ a/k/a EDUARDO GARZONA, Claimant, vs. WYCKOFF HEATING & COOLING, Employer, and LEMARS INSURANCE COMPANY, Insurance Carrier, Defendants.	 File Nos. 5061081, 5061082 A R B I T R A T I O N D E C I S I O N Head Note No.: 1803

STATEMENT OF THE CASE

Mynor Alexander Mendoza Ferrez a/k/a Eduardo Garzona, claimant, filed petitions in arbitration seeking workers' compensation benefits from Wyckoff Heating and Cooling (Wyckoff) and its insurer, LeMars Insurance Company as a result of injuries he allegedly sustained on May 21, 2014 and September 5, 2014 that arose out of and in the course of his employment. This case was heard in Des Moines, Iowa and fully submitted on October 10, 2017. The hearing was interpreted. The evidence in this case consists of the testimony of claimant, Joint Exhibits 1 – 4, Claimant's Exhibits 1 – 6 and Defendants' Exhibits A and B. Both parties submitted briefs.

For File No. 5061081 (Date of injury May 21, 2014)

ISSUES

1. Whether the injury of May 21, 2014 is a cause of permanent disability and, if so;

2. Whether the alleged disability is a scheduled member disability or an unscheduled/industrial disability.

3. The extent of claimant's disability.

4. Assessment of costs.

For File No. 5061082 (Date of injury September 5, 2014)

ISSUES

1. The extent of claimant's disability.
2. Whether the alleged disability extends to more than the claimant's lower back.
3. The extent defendants may be entitled to a credit under Iowa Code section 85.34(7) (b) (1).
4. Assessment of costs.

STIPULATIONS

The parties filed hearing reports at the commencement of the arbitration hearing. On the hearing reports, 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.

FINDINGS OF FACT

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

Eduardo Garzona, claimant was 41 years old at the time of the hearing. He graduated high school and completed three years of college in Guatemala studying law. He did not complete that course of studies. (Transcript, page 13) Claimant would like to return to Guatemala at some point to complete his law studies. (Tr. p. 48) Claimant has completed some computer programing courses in the United States. (Tr. p. 46) Claimant's primary language is Spanish, and he is able to understand and speak English about 50 percent. (Tr. p. 14) Claimant is able to communicate with supervisors and coworkers in English. Claimant testified that prior to his work at Wyckoff he had a back injury that resulted in a surgery in 1999. Claimant said that he had no restrictions after that injury and surgery. (Tr. p. 19)

Claimant testified he would help install air conditioning systems in new buildings when he worked for Wyckoff. Depending on the task at Wyckoff's, claimant could be working overhead, working on his knees, lifting up to 150 pounds, using ladders and bending. (Tr. pp. 16, 17)

Claimant testified he suffered two separate injury incidents while working for Wyckoff. On May 21, 2014 claimant fell down a flight of stairs at work. On September 5, 2014 claimant was moving a box containing a heater that fell on him. Defendants have admitted claimant injured his lower back on September 5, 2014.

Claimant said due to his fall at work on May 21, 2014 he injured his right shoulder, left knee and his back. (Tr. p. 20) Claimant had treatment provided by defendants and he returned to full duty. (Tr. pp. 20, 21)

On September 5, 2014 claimant injured his back when trying to unload a heater. Defendants provided medical treatment and sent claimant to Randall Miller, D.O. (hereinafter Dr. R. Miller) for treatment. (Tr. p. 22) On May 23, 2014 Dr. R. Miller saw claimant and his assessment was that claimant had a contusion/strain right shoulder, contusion/strain right lower back and was doubtful that claimant had a concussion. (Joint Exhibit 1, p. 2) Claimant was referred by Dr. R. Miller for an orthopedic evaluation on June 3, 2014. (JEx. 1, p. 10) Claimant was seen by Daniel Miller, D.O. (hereinafter Dr. D. Miller) on June 18, 2014. Dr. D. Miller noted that claimant was complaining of a feeling "like a little pin prick" in the right shoulder, a little discomfort in the left knee, and his low back pain had resolved. (JEx. 2, p. 20) On June 30, 2014 an MRI on claimant's left knee was obtained. Claimant was not experiencing a lot of pain in his left knee on that visit, but it would give out if claimant did a lot of walking. Claimant also stated that while he was not having a lot of pain in his right upper extremity claimant would note occasional pain when he was using the right upper extremity for forceful activities. (JEx. 2, p. 23) Claimant was allowed to return to modified work at the warehouse. (Tr. p. 23; JEx. 2, p. 25) Claimant was returned to full duty July 21, 2014. (JEx. 2, p. 28) Dr. D. Miller noted on August 13, 2014 that claimant's shoulder was feeling good after he received an injection and that claimant did have a few times with pain in his shoulder but was able to massage the area and the pain went away. Claimant was found to be at maximum medical improvement (MMI) and discharged from treatment. (JEx. 2, p. 30)

Claimant was seen by Dr. R. Miller on September 10, 2014. Dr. R. Miller's assessment was right low back and right leg pain. (JEx. 1, p. 16) Claimant was seen by Dr. D. Miller on September 11, 2014 for lower back pain. Dr. D. Miller's assessment was lumbar strain. (JEx. 2, p. 33) On September 18, 2018 Dr. D. Miller answered "Yes" to the question of whether claimant sustained a permanent partial impairment as a result of his May 21, 2014 work injury. Dr. D. Miller provided a zero impairment rating under the AMA guides. (JEx. 2, p. 35)

Claimant was terminated by Wyckoff on October 10, 2014. (Tr. p. 23) Claimant testified that after his termination at Wyckoff he did not understand that he could continue to receive treatment for his work injury. (Tr. p. 24)

On December 17, 2015 Dr. D. Miller wrote,

> After reviewing the history, performing physical examination, revealing the MRI reports it is my opinion that the current complaints of the right shoulder and lumbar back are causally related to the work injury of May 21st 2014.

(JEx. 2, p. 46)

On February 18, 2016 Dr. D. Miller examined claimant concerning his right shoulder. Claimant stated his shoulder was 80 percent better and only causes pain when he reaches for something high. Dr. D. Miller found claimant at MMI and released him from treatment. (JEx. 2, p. 52)

Todd Harbach, M.D. examined claimant on January 29, 2016. Dr. Harbach reviewed an MRI and stated,

> The patient has a very large central disk herniation at L5-S1 that is causing severe central and bilateral lateral recess stenosis. On the magnetic resonance imaging, it actually looks worse on the LEFT than on the RIGHT, but patient is more symptomatically on his RIGHT. He has had a previous RIGHT-sided L4-L5 diskectomy in the late 1990s. At this point, with the symptoms he is having, he really is down to two viable options. The first being injections in the pain clinic and the second being operative discectomy. Because of the amount of stenosis he has, discectomy will probably be the option that would get him back ready to work the fastest. However, injections may also work. He is undecided on which way he wants to proceed and wishes to discuss this with his family and give me a call. I put him on light duty for work and we will see him back in 4 weeks. I believe he will call, and I can arrange injections or surgery.

(JEx. 3, p. 68) A back surgery was performed on March 9, 2016. The postoperative diagnosis was "1. Right S1 radiculopathy. 2. Herniated nucleus pulposus central to right-sided at L5-S1. 3. L5–S1 stenosis." (JEx. 3, p. 71) On April 29, 2016 Dr. Harbach noted claimant's back pain had resolved, but claimant had right-sided low back pain that wraps around his buttock and goes down his leg. (JEx. 3, p. 81) On June 24, 2016 Dr. Harbach found claimant at MMI and released claimant to return to work. (JEx. 3, p. 87; Tr. p. 26) I find June 24, 2016 is the date claimant reached MMI. On July 24, 2016 Dr. Harbach assigned a rating of 10 percent whole body impairment. (JEx. 3, p. 89)

Claimant had a functional capacity evaluation (FCE) on October 24, 2016. The results were deemed valid. The significant limitations noted were,

1. Lifting waist to/from floor up to 30 lbs.
2. Lifting waist to/from crown up to 20 lbs.
3. Front carry up to 30 lbs. up to 50 ft.
4. Right arm carry up to 20 lbs. up to 50 ft.
5. Left arm carry up to 20 lbs. up to 50 ft.

(Ex. 1, p. 3) The FCE noted claimant could occasionally carry 25 pounds and should limit elevated work, forward bent standing, reaching and kneeling/half-kneeling to an

occasional basis. (Ex. 1, p. 3) I find the restrictions in this FCE are claimant's restrictions.

Robin Sassman, M.D. performed an independent medical examination on January 3, 2017 and issued her report on January 27, 2017. Dr. Sassman stated,

> It is my opinion that the incident that occurred on or about May 21, 2014, was directly and causally related to Mr. Garzona's low back pain, right shoulder pain and left knee pain (which has since resolved), the need for the surgery on his low back and the need for the treatment recommendations outlined in this report.

(Ex. 2, p. 21) Dr. Sassman stated that the September 5, 2014 injury caused an aggravation of the underling low back issue that was a result of the May 21, 2014 injury. (Ex. 2, p. 21) Dr. Sassman said that if claimant did not receive additional treatment recommendations the date claimant was at MMI was March 9, 2017—one year after his surgery. (Ex. 2, p. 22) Dr. Sassman provided a 20 percent rating for the low back and 7 percent for the shoulder with a combined whole body rating of 26 percent. (Ex. 1, p. 23) Dr. Sassman recommended restrictions of,

> Of note, these may change with further treatment. Mr. Garzona should limit lifting, pushing, pulling and carrying to 30 pounds occasionally from floor to waist, 20 pounds rarely from waist to shoulder, and 10 pounds rarely above shoulder height. He should limit the use of vibratory and power tools to an occasional basis. He should limit standing and walking to an occasional basis and will need to change positions due to his low back symptoms.

(Ex. 2, p. 23)

On July 20, 2017 Dr. Harbach adopted the limitations of the October 24, 2016 FCE. Dr. Harbach stated claimant could carry up to 25 pounds occasionally. (JEx. 3, p. 90)

Claimant obtained work through a temporary employment agency installing insulation shortly after his termination at Wyckoff. (Tr. p. 30) Claimant suffered a work injury to his right hand and right ankle in February 2015. (Tr. p. 30) Claimant continued to work for the temporary employment agency and was let go when there was no more light work. (Tr. pp. 30, 31) In his deposition claimant said that he was unable to continue working due to his hand injury. (Ex. A, p. 20)

At the time of the hearing claimant had recently worked as an inspector at a hotel being constructed, making sure that each room was completed properly and in working order. The work was not full time. (Tr. p. 33) That position did not appear to be available to claimant on a full-time or regular basis. Claimant attempted to work as a cleaner in the kitchen in a restaurant and lasted about a week due to back pain. (Tr. p.

33) Claimant testified he currently has a lot of back pain. (Tr. p. 34) He feels his back pain gets progressively worse as the day goes by. He limits lifting; including limiting how often he lifts his daughter. (Tr. p. 36) Claimant said that his right shoulder causes pain when he tries to use his arm above his head. (Tr. p. 35) In his deposition claimant said that he did not have the same mobility in his right shoulder as his left. (Ex. A, p. 31) Claimant no longer goes to the gym, rides his bike, and is not able to assist his mother in mowing her lawn or shoveling her walks. (Tr. p. 38) Claimant testified that he did not believe he could return to his past work, (listed in Exhibit 3, page 37), because of the physical nature of those jobs as well as the amount of standing. (Tr. p. 43)

On June 20, 2017 Carma Mitchell, MS, CRC provided a vocational evaluation. Ms. Mitchell wrote claimant would not be able to engage in full-time competitive work and that the need to limit standing and walking would preclude the vast majority of claimant's previous work. Ms. Mitchell stated claimant lost 100 percent access to the jobs he had access to prior to his injury and 100 percent of his earning capacity. (Ex. 3, p. 35)

On July 7, 2017, Theresa Wolford, MS, CRC provided an earning capacity evaluation. The report evaluated claimant's prior work and his vocational abilities. The report provided three different opinions based upon three different sets of restrictions. (Ex. B, p. 15) Using the restriction/limitation in the FCE dated October 24, 2019, Ms. Wolford opines claimant sustained a 100 percent loss of earning capacity, although she noted that the FCE, over six months old, should not be considered valid. (Ex. B, p. 15) She stated that using the results of the IME of June 14, 2015, claimant had a 30 or 35 percent loss of earning capacity. (Ex. B, p. 15) Lastly, she opined that using the IME of January 3, 2012 claimant had a 50 to 60 percent loss of earning capacity. (Ex. B, p. 15) On the same day as her earning capacity report Ms. Wolford reviewed the vocational report of Carma Mitchell. Ms. Wolford noted Ms. Mitchell relied upon what Ms. Wolford considered an invalid FCE and that Ms. Mitchell did not separate restrictions based upon different providers. (Ex. B, p. 16)

For the May 21, 2014 injury I find that claimant's gross earnings were $588.36 and he was single and entitled to three exemptions. Claimant's weekly workers' compensation rate is $386.65.

Claimant has requested reimbursement of costs in the amount of $1,495.37. (Ex. 6)

RATIONALE AND CONCLUSIONS OF LAW

Defendants dispute claimant suffered any permanent disability due to his fall at work on May 21, 2014 or the lifting incident on September 5, 2014.

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. Quaker Oats Co. v. Ciha, 552 N.W.2d 143 (Iowa 1996); Miedema v. Dial

Corp., 551 N.W.2d 309 (Iowa 1996). The words "arising out of" referred to the cause or source of the injury. The words "in the course of" refer to the time, place, and circumstances of the injury. 2800 Corp. v. Fernandez, 528 N.W.2d 124 (Iowa 1995). An injury arises out of the employment when a causal relationship exists between the injury and the employment. Miedema, 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. Koehler Electric v. Wills, 608 N.W.2d 1 (Iowa 2000); Miedema, 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. Ciha, 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. 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).

There is no evidence that claimant has any permanent injury to his knee due to the May 21, 2014 or September 5, 2014 injuries.

There is also no convincing evidence that claimant suffered any permanent injury due to the September 5, 2014 injury. Claimant suffered a temporary aggravation of his May 21, 2014 injury due to the September 5, 2014 back injury.

Dr. Sassman, Dr. D. Miller and Dr. Harbach attribute claimant's lower back injury to the May 21, 2014 injury. Dr. D. Miller opined on December 17, 2015 that claimant's right shoulder and lower back injuries were related to his injury of May 21, 2014. I find that claimant has proven by a preponderance of the evidence that he suffered a permanent injury to his back due to the May 21, 2014 work injury.

I also find that claimant has proven an injury to his right shoulder on May 21, 2014. The convincing evidence of Dr. Sassman and Dr. D. Miller is that the fall down the stairs On May 21, 2014 did cause a permanent disability. Claimant's ability to use his right shoulder and right arm are compromised due to this injury.

Claimant has proven he has an industrial disability for the May 21, 2014 injury. 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.

In assessing an unscheduled, whole-body injury case, the claimant's loss of earning capacity is determined as of the time of the hearing based upon industrial disability factors then existing. The commissioner does not determine permanent disability, or industrial disability, based upon anticipated future developments. Kohlhaas v. Hog Slat, Inc., 777 N.W.2d 387, 392 (Iowa 2009)

Total disability does not mean a state of absolute helplessness. Permanent total disability occurs where the injury wholly disables the employee from performing work that the employee's experience, training, education, intelligence, and physical capacities would otherwise permit the employee to perform. See McSpadden v. Big Ben Coal Co., 288 N.W.2d 181 (Iowa 1980); Diederich v. Tri-City R. Co., 219 Iowa 587, 258 N.W. 899 (1935).

A finding that claimant could perform some work despite claimant's physical and educational limitations does not foreclose a finding of permanent total disability, however. See Chamberlin v. Ralston Purina, File No. 661698 (App. October 1987); Eastman v. Westway Trading Corp., II Iowa Industrial Commissioner Report 134 (App. May 1982).

In this case there are two vocational experts; Ms. Mitchell who has found a 100 percent loss of earning capacity and Ms. Wolford who has found a loss earning capacity depending on which restrictions are used. I accepted the restrictions based upon the FCE, as those were accepted by claimant's treating orthopedic surgeon, Dr. Harbach. While Ms. Wolford cautioned in using the FCE results, as they were adopted by the treating physician, I find them to be the most convincing evidence of claimant's restrictions and vocational abilities.

Two vocational experts have opined that claimant has a 100 percent loss of earning capacity. Claimant has significant limitations which precludes him from performing his previous work. Claimant can communicate in English, but is not proficient. Claimant has difficulty in standing and walking for a full day at work and can only work above his head on an occasional basis. He is limited in lifting. Claimant has performed some work after his termination at Wyckoff but has not been successful in maintaining employment. He has injuries subsequent to his work at Wyckoff that impacted his ability or work, but were not considered by the undersigned in determining claimant's industrial disability. Looking at claimant's industrial disability factors I find claimant has proven that he has a permanent and total industrial loss.

Claimant has requested costs in the amount of $1,495.37. Iowa Code section 86.40 states:

> **Costs.** All costs incurred in the hearing before the commissioner shall be taxed in the discretion of the commissioner.

Iowa Administrative Code Rule 876—4.33(86) states in part:

> **Costs.** Costs taxed by the workers' compensation commissioner or a deputy commissioner shall be ... (3) costs of service of the original notice and subpoenas, (6) the reasonable costs of obtaining no more than two doctors' or practitioners' reports, (7) filing fees when appropriate.

Iowa Administrative Code rule 876—4.17 includes as a practitioner, "persons engaged in physical or vocational rehabilitation or evaluation for rehabilitation." A report or evaluation from a vocational rehabilitation expert constitutes a practitioner report under our administrative rules. Bohr v. Donaldson Company, File No. 5028959 (Arb. November 23, 2010); Muller v. Crouse Transportation, File No. 5026809 (Arb. December 8, 2010) The entire reasonable costs of doctors' and practitioners' reports may be taxed as costs pursuant to 876 IAC 4.33. Caven v. John Deere Dubuque Works, File Nos. 5023051, 5023052 (App. July 21, 2009).

The Iowa Supreme Court provided guidance on whether the full cost of an IME may be taxed as a cost pursuant to rule 876 IAC 4.33 if that IME does not qualify for reimbursement under Iowa Code section 85.39. Des Moines Area Reg'l Transit Auth. v. Young, 867 N.W.2d 839, (Iowa 2015). In Young, the Court clarified that rule 876 IAC 4.33 allows only for the taxation of costs "incurred in the hearing." A physician's report

becomes a cost incurred in a hearing when it is used as evidence in lieu of the doctor's testimony. However, the Court has indicated that the report is separate from the examination. The Court indicated that if an injured worker sought reimbursement for an IME, the provisions established by the legislature, under Iowa Code section 85.39, must be followed. Only the costs associated with preparation of the written report of a claimant's IME can be reimbursed as a cost at hearing under rule 876 IAC 4.33. (Id., pp. 846-847)

In my discretion, I award the filing fee and service costs of $112.92. I award the cost of the FCE report of $350.00 and the cost of the vocational report of $162.50 ($65.00 x 2.5 hours = 162.50). (Ex. 6, pp. 46, 51) Defendants shall pay claimant $625.42 in costs.

Defendants paid benefits at the rate of $427.36. I found the correct rate is $386.65. Defendants overpaid claimant $40.71 for 50 weeks. Defendants are entitled to a credit against a subsequent injury with Wyckoff.

ORDER

For File No. 5061081 (Date of injury May 21, 2014)

Defendants shall pay claimant permanent total disability benefits for so long as claimant is totally disabled commencing June 24, 2016 at the rate of three hundred eighty-six and 65/100 dollars ($386.65.).

Defendants are entitled to a credit of fifty (50) weeks of permanent partial disability benefits paid at the weekly rate of three hundred eighty-six and 65/100 dollars ($386.65). Defendants are entitled to a credit of forty and 71/100 dollars ($40.71) for fifty (50) weeks for the overpayment of benefits, if claimant has a subsequent injury with Wyckoff.

Defendants shall pay accrued weekly benefits in a lump sum together with interest at the rate of ten (10) 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 (2) percent. See Gamble v. AG Leader Technology File No. 5054686 (App. Apr. 24, 2018)

Defendants shall pay claimant costs in the amount of six hundred twenty-five and 42/100 dollars ($625.42).

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

For File No. 5061082 (Date of injury September 5, 2014)

The claimant shall take nothing further in this file.

Signed and filed this 28th day of June, 2018.

JAMES F. ELLIOTT
DEPUTY WORKERS'
COMPENSATION COMMISSIONER

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JFE/sam

Right to Appeal: This decision shall become final unless you or another interested party appeals within 20 days from the date above, pursuant to rule 876-4.27 (17A, 86) of the Iowa Administrative Code. The notice of appeal must be in writing and received by the commissioner's office within 20 days from the date of the decision. The appeal period will be extended to the next business day if the last day to appeal falls on a weekend or a legal holiday. The notice of appeal must be filed at the following address: Workers' Compensation Commissioner, Iowa Division of Workers' Compensation, 1000 E. Grand Avenue, Des Moines, Iowa 50319-0209.