

APPEAL NO. 091442
FILED NOVEMBER 24, 2009

This appeal arises pursuant to the Texas Workers' Compensation Act, TEX. LAB. CODE ANN. § 401.001 *et seq.* (1989 Act). A contested case hearing (CCH) was held on August 25, 2009. The hearing officer decided that the first assigned impairment rating (IR) from (Dr. H) on May 9, 2008, became final under Section 408.123 and that it was appropriate for the Texas Department of Insurance, Division of Workers' Compensation (Division) to appoint (Dr. S) as a designated doctor to address maximum medical improvement, IR, and disability.

The appellant (claimant) appealed the hearing officer's finality determination. The appeal file does not contain a response from the respondent (carrier). The hearing officer's determination that Dr. S was appropriately appointed as a designated doctor to address the specified issues was not appealed and has become final pursuant to Section 410.169.

DECISION

Reversed and remanded for reconstruction of the record.

Section 410.203(a)(1) requires the Appeals Panel to consider the record developed at the CCH. The CCH was recorded on one audiotape. The introductory and preliminary matters to include admission of exhibits were faint and at times inaudible. Large portions of the testimony were inaudible. The appeal file does not indicate that a court reporter was present and the file does not contain a transcript or other recording of the proceeding. Consequently, we remand the case for reconstruction of the CCH record. See Appeals Panel Decision (APD) 060353, decided April 12, 2006.

Pending resolution of the remand, a final decision has not been made in this case. However, since reversal and remand necessitate the issuance of a new decision and order by the hearing officer, a party who wishes to appeal from such new decision must file a request for review not later than 15 days after the date on which such new decision is received from the Division, pursuant to Section 410.202 which was amended June 17, 2001, to exclude Saturdays and Sundays and holidays listed in Section 662.003 of the Texas Government Code in the computation of the 15-day appeal and response periods. See APD 060721, decided June 12, 2006.

The true corporate name of the insurance carrier is **TEXAS MUTUAL INSURANCE COMPANY** and the name and address of its registered agent for service of process is

**RUSSELL OLIVER, PRESIDENT
6210 EAST HIGHWAY 290
AUSTIN, TEXAS 78723.**

Margaret L. Turner
Appeals Judge

CONCUR:

Thomas A. Knapp
Appeals Judge

Veronica L. Ruberto
Appeals Judge