

APPEAL NO. 110342
FILED APRIL 29, 2011

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 February 23, 2011. With regard to the only issue before her the hearing officer determined that the compensable injury of _____, includes disc protrusions/herniations at L3-4 and L4-5 with radiculopathy at L4-5.

The appellant (carrier) appealed on a sufficiency of the evidence basis. The respondent (claimant) responded, urging affirmance.

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 file contains one compact disc (CD). The CD submitted for review indicates that it is 18 minutes and 25 seconds in length and begins with the cross-examination of a doctor and then contains closing statements of the parties. Based on review of the hearing officer's decision and order the CD does not contain the introduction/admission of any exhibits (although there are exhibits in the file), any opening statements, the direct and cross-examination of the claimant, and the direct testimony and some cross-examination of a doctor called by the carrier. Inquiry about a more complete recording was made but only a duplicate copy of the 18 minute CD was furnished. The file indicates that there was no court reporter present and the file does not contain a transcript or a tape recording of the CCH proceeding. Consequently, we reverse and remand this case to the hearing officer for reconstruction of the complete 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 Texas Department of Insurance, Division of Workers' Compensation, 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

**MR. RON O. WRIGHT, PRESIDENT
6210 HWY 290 EAST
AUSTIN, TEXAS 78723.**

Thomas A. Knapp
Appeals Judge

CONCUR:

Cynthia A. Brown
Appeals Judge

Margaret L. Turner
Appeals Judge