

APPEAL NO. 130279  
FILED APRIL 8, 2013

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 December 13, 2012, in [City], Texas, with [hearing officer] presiding as hearing officer. The hearing officer determined that the compensable injury of [date of injury], extends to left carpal tunnel syndrome (CTS).

The appellant/cross respondent (carrier) appealed, contending that the hearing officer's determination on the extent of injury is not supported by sufficient expert medical evidence and that the hearing officer failed to make findings of fact, conclusions of law, and a decision on the issues of maximum medical improvement (MMI) and impairment rating (IR). The respondent/cross appellant (claimant) responded, urging affirmance on the extent-of-injury issue. The claimant also cross-appealed the hearing officer's failure to add the issues of MMI and IR. The appeal file does not contain a response to the claimant's cross-appeal.

**DECISION**

Affirmed in part as reformed and reversed and remanded in part.

The claimant, a sales associate, testified how she fell on a wet floor, falling forward on her hands and knees, after hitting her left elbow, on [date of injury]. The parties stipulated that the claimant sustained a compensable injury on [date of injury]. Although the parties also stipulated that the statutory date of MMI is September 19, 2009, and that [Dr. A] is the Texas Department of Insurance, Division of Workers' Compensation (Division)-selected designated doctor to give an opinion on MMI, IR, and extent of injury, those stipulations were not included in the hearing officer's decision and order. We reform the hearing officer's decision and order by adding as Finding of Fact 1. E. the statutory date of MMI is September 19, 2009, and as Finding of Fact 1. F. Dr. A is the designated doctor for MMI, IR, and extent of injury.

**EXTENT OF INJURY**

The hearing officer's determination that the compensable injury of [date of injury], extends to left CTS is supported by sufficient evidence and is affirmed.

**MMI AND IR**

A review of the record in this case establishes that the claimant renewed a motion to add the issues of whether the claimant has reached MMI, and if so, on what date and if the claimant has reached MMI, what is the IR. The carrier on the record

agreed to add those issues. The hearing officer stated that those issues would be added; however, the hearing officer, in his decision and order, failed to make any reference, finding of fact, conclusion of law, or a decision in the decision and order regarding the MMI and IR issues. Therefore, the hearing officer erred in failing to fully address all the issues presented at the CCH. Accordingly, we reverse the hearing officer's decision as being incomplete and we remand the issues of MMI and IR for the hearing officer to consider and make findings of fact, conclusions of law, and a decision on the MMI and IR issues.

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 Appeals Panel Decision 060721, decided June 12, 2006.

The true corporate name of the insurance carrier is **AMERICAN HOME ASSURANCE COMPANY** and the name and address of its registered agent for service of process is

**CORPORATION SERVICE COMPANY  
211 EAST 7TH STREET, SUITE 620  
AUSTIN, TEXAS 78701.**

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Thomas A. Knapp  
Appeals Judge

CONCUR:

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Carisa Space-Beam  
Appeals Judge

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Margaret L. Turner  
Appeals Judge