

APPEAL NO. 131912
FILED OCTOBER 7, 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 July 15, 2013, in [City], Texas, with [hearing officer] presiding as hearing officer. The hearing officer resolved the disputed issues by deciding that: (1) the compensable injury of [date of injury], does not extend to lumbar facet syndrome; (2) the appellant (claimant) reached maximum medical improvement (MMI) on March 27, 2012; and (3) the claimant's impairment rating (IR) is five percent. The claimant appealed, disputing the hearing officer's determinations of extent of injury, MMI, and IR. The claimant contends on appeal that her treating doctor gives a clear explanation of the causal connection between the compensable injury and the extent-of-injury condition at issue. The claimant further contends the certification of MMI/IR that the hearing officer bases her MMI/IR determination on did not consider the entire compensable injury. The respondent (self-insured) responded, urging affirmance of the disputed extent of injury, MMI, and IR determinations.

DECISION

Reversed and remanded.

Section 410.203(a)(1) requires the Appeals Panel to consider the record developed at the CCH. The appeal file contains two compact discs (CD). The first CD has one track that is three seconds long and contains no sound. The second CD is approximately 53 minutes long. At the beginning of the second CD, the hearing officer announces that they are back on the record and one of the parties thanks the hearing officer for the break. The CD continues with testimony from the claimant. However, it is obvious that it does not contain the entirety of the claimant's testimony. Consequently, a full review of the record could not be completed. The file indicates there was no court reporter and the file does not contain a transcript or a tape recording of the CCH proceeding. We reverse and remand this case to the hearing officer 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 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 **(a certified self-insured)** and the name and address of its registered agent for service of process is

**CSC – THE U.S. CORPORATION COMPANY
400 NORTH ST. PAUL STREET
DALLAS, TEXAS 75201.**

Margaret L. Turner
Appeals Judge

CONCUR:

Veronica L. Ruberto
Appeals Judge

Carisa Space-Beam
Appeals Judge