

DECISION AND ORDER

This case is decided pursuant to Chapter 410 of the Texas Workers' Compensation Act and Rules of the Division of Workers' Compensation adopted thereunder.

ISSUE

A contested case hearing was held on October 14, 2008, to decide the following disputed issue:

1. Is the preponderance of the evidence contrary to the IRO decision that Claimant is not entitled to repeat myelogram and past myelogram CT scan for the compensable injury of _____?

PARTIES PRESENT

Claimant appeared and was assisted by JT, Ombudsman.

Carrier appeared and was represented by RJ, Attorney.

AGREEMENT

The parties reached an agreement. The agreement resolves only those issues to be decided at this hearing. The agreement does not resolve all issues with regard to this claim and is not a settlement.

In this decision, this Agreement section includes findings of fact and the Decision section constitutes the conclusions of law.

The Hearing Officer found:

- A. Carrier delivered to Claimant a single document stating the true corporate name of Carrier, and the name and street address of Carrier's registered agent, which document was admitted into evidence as Hearing Officer's Exhibit Number 2.
- B. The Texas Department of Insurance, Division of Workers' Compensation, has jurisdiction to hear this case.
- C. Venue is proper in the (City) Field Office of the Texas Department of Insurance, Division of Workers' Compensation.
- D. On _____, Claimant was the Employee of (Employer).

The parties agreed as follows:

Parties agree that, as of the date of this agreement, the preponderance of the evidence is contrary to the IRO decision that Claimant is not entitled to repeat myelogram and post myelogram CT scan for the compensable injury of _____.

DECISION

Parties agree that, as of the date of this agreement, the preponderance of the evidence is contrary to the IRO decision that Claimant is not entitled to repeat myelogram and post myelogram CT scan for the compensable injury of _____.

ORDER

Carrier is ordered to pay benefits in accordance with this decision, the Texas Workers' Compensation Act, and the Commissioner's Rules.

The true corporate name of the insurance carrier is **EMPLOYERS INSURANCE COMPANY OF WAUSAU**, and the name and address of its registered agent for service of process is:

**CT CORPORATION SYSTEMS
350 NORTH ST. PAUL STREET
DALLAS, TEXAS 75201**

Signed this 20th day of October, 2008.

Donald E. Woods
Hearing Officer