

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.

ISSUES

A contested case hearing was held on November 12, 2008, to decide the following disputed issue:

1. Is the preponderance of the evidence contrary to the decision of the IRO that the Claimant is not entitled to the remaining 13 visits of the functional restoration program for the compensable injury of _____?

PARTIES PRESENT

Petitioner/Claimant appeared and was represented by PR, attorney. Respondent/Carrier appeared and was represented by PW, 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/Respondent delivered to Petitioner/Claimant a single document stating the true corporate name of Carrier/Respondent, and the name and street address of Carrier's registered agent, which document was admitted into evidence as Hearing Officer's Exhibit Number 2.

The parties agreed as follows:

1. The Texas Department of Insurance, Division of Workers' Compensation, has jurisdiction to hear this case.
2. Venue is proper in the (City) Field Office of the Texas Department of Insurance, Division of Workers' Compensation.
3. On _____, Claimant was the employee of (Employer), and sustained a compensable injury.

4. To withdraw the disputed issue of “Is the preponderance of the evidence contrary to the decision of the IRO that the Claimant is not entitled to the remaining 13 visits of the functional restoration program for the compensable injury of _____?”

DECISION

Parties have agreed to withdraw the disputed issue of “Is the preponderance of the evidence contrary to the decision of the IRO that the Claimant is not entitled to the remaining 13 visits of the functional restoration program for the compensable injury of _____?”

ORDER

Carrier is ordered to pay benefits in accordance with this decision, the Texas Workers’ Compensation Act, and Commissioner’s Rules. Claimant remains entitled to medical benefits for the compensable injury in accordance with §408.021.

The true corporate name of the insurance carrier is **DALLAS NATIONAL INSURANCE CO.**, and the name and address of its registered agent for service of process is:

**MR. BILL HAGAN
DALLAS NATIONAL INSURANCE COMPANY
14160 DALLAS PARKWAY SUITE 500
DALLAS, TEXAS 75254**

Signed this 13th day of November, 2008

Cheryl Dean
Hearing Officer