

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 September 30, 2010, to decide the following disputed issue:

Is the preponderance of the evidence contrary to the decision of the Independent Review Organization (IRO) that 10 sessions of chronic pain management is health care reasonably required for the compensable injury of _____?

PARTIES PRESENT

Petitioner/Carrier appeared and was represented by LW, attorney. Respondent/Claimant appeared and was assisted by TM, ombudsman.

AGREEMENT

The parties reached an agreement. The agreement only resolves the issue decided at this hearing. The agreement does not resolve all issues regarding the claim and is not a settlement.

In this decision the Agreement section includes the 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.

The parties agreed as follows:

1. Venue is proper in the (City) Field Office of the Texas Department of Insurance, Division of Workers' Compensation.
2. On _____, Claimant sustained a compensable injury while employed by (Employer).
3. (Independent Review Organization), the Independent Review Organization (IRO) selected by the Texas Department of Insurance, overturned Carrier's refusal to preauthorize ten (10) sessions of chronic pain management, determining that the requested chronic pain management is medically reasonable and necessary per Official Disability Guidelines (ODG) criteria.

4. The preponderance of the evidence is not contrary to the decision of the IRO that 10 sessions of chronic pain management is health care reasonably required for the compensable injury of _____.

DECISION

Claimant is entitled to ten (10) sessions of chronic pain management.

ORDER

Carrier is liable for the benefits at issue in this hearing. Claimant remains entitled to medical benefits for the compensable injury in accordance with §408.021.

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 CO.
701 BRAZOS STREET, STE. 1050
AUSTIN, TX 78701**

Signed this 30th day of September, 2010.

KENNETH A. HUCHTON
Hearing Officer