

APPEAL NO. 240080
FILED MARCH 21, 2024

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, 2023, in (city), Texas, with (administrative law judge) presiding as the administrative law judge (ALJ). The ALJ resolved the disputed issues by deciding that: (1) the compensable injury of (date of injury), extends to a left shoulder rotator cuff tear; (2) the respondent (claimant) has not reached maximum medical improvement (MMI); and (3) because the claimant has not reached MMI, she cannot be assessed an impairment rating (IR) at this time.

The appellant (self-insured) appealed the ALJ's determinations. There was no response from the claimant to the self-insured's appeal.

DECISION

Reversed and remanded.

This case is remanded for the purpose of compliance with House Bill (H.B.) 2600 of the 77th Texas Legislature, Regular Session (R.S.) amending Section 410.164, effective June 17, 2001. Section 410.164 was amended by the addition of subsection (c), which provides as follows:

(c) At each CCH, as applicable, the insurance carrier shall file with the ALJ and shall deliver to the claimant a single document stating the true corporate name of the insurance carrier and the name and address of the insurance carrier's registered agent for service of process. The document is part of the record of the CCH.

In this case, the address provided on the self-insured's information form for the person identified as the registered agent was a post office box, where service of process cannot be effectuated. Therefore, we remand this case so that a street address may be provided by the self-insured for its registered agent, in order to carry out the purpose of the legislation. See Appeals Panel Decision (APD) 210080, decided March 12, 2021.

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 ALJ, 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.

Cristina Beceiro
Appeals Judge

CONCUR:

Carisa Space-Beam
Appeals Judge

Margaret L. Turner
Appeals Judge