

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 benefit contested case hearing was held on March 28, 2008, to decide the following disputed issue:

Whether the preponderance of the evidence is contrary to the Medical Fee Dispute Resolutions Findings and Decision that (health care provider) is entitled to be paid \$8.57 for services provided on ___?

PARTIES PRESENT

Petitioner appeared and was represented by an (Attorney). Respondent, appeared and was represented by GG, lay representative. Also appearing on behalf of Respondent was AC.

BACKGROUND

The parties reached an agreement. The agreement resolves only the issues to be decided at this hearing. The agreement does not resolve issues in the underlying claim.

FINDINGS OF FACT

1. The parties stipulated to the following facts:
 - A. Venue is proper in the (City) Field Office of the Texas Department of Insurance, Division of Workers' Compensation.
 - B. On __, Claimant was the (Employer).
 - C. On __, Claimant sustained a compensable injury.
 - D. (Health care provider) sought payment in the amount of \$8.57 for services rendered on __.
 - E. (Health care provider) provided reasonable and necessary medical services for the compensable injury on __, which gave rise to the fees requested herein.
 - F. On February 7, 2008, Carrier paid (health care provider) the amount sought, and further payment is not owed for services provided on __.

2. 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.

CONCLUSIONS OF LAW

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.
3. Carrier paid (health care provider) the amount sought, on February 7, 2008, and further payment is not owed for services provided on ___.

DECISION

Carrier paid (health care provider) the amount sought, on February 7, 2008, and further payment is not owed for services provided on ___.

ORDER

Under the terms of this agreement, Carrier is not liable for any additional payments for services provided on ___.

The true corporate name of the insurance carrier is **TEXAS MUTUAL INSURANCE COMPANY** and the name and address of its registered agent for service of process is

**RUSSELL OLIVER, PRESIDENT
TEXAS MUTUAL INSURANCE COMPANY
6210 EAST HIGHWAY 290
AUSTIN, TEXAS 78723**

Signed this 28th day of March 2008.

Edward Vilano
Hearing Officer