WORKERS' COMPENSATION APPEALS BOARD
STATE OF CALIFORNIA

ANDRES VIZCARRA, ***Applicant***

vs.

MASTER TOYS AND NOVELTIES, INC.; TOKIO MARINE AMERICA, ***Defendants***

Adjudication Numbers: ADJ7810002; ADJ7982917
Los Angeles District Office

OPINION AND ORDERS DENYING PETITION FOR RECONSIDERATION, GRANTING PETITION FOR RECONSIDERATION AND DECISION AFTER RECONSIDERATION

Applicant and defendant Master Toys and Novelties, Inc. both seek reconsideration of the March 15, 2024 Joint Findings and Award (F&A), wherein the workers' compensation administrative law judge (WCJ) found that applicant, while employed as a warehouse manager on April 1, 2011, and from April 20, 2010 to April 29, 2011, sustained industrial injury to his cervical spine, lumbar spine, bilateral shoulders, bilateral wrists, bilateral knees, psyche, and internal systems. The WCJ found in relevant part that applicant sustained 76 percent disability, and that applicant was entitled to the statutory increase of Labor Code section 4658(d).

Applicant contends that the WCJ erred in not relying on the reporting of applicant's vocational expert and instead awarding less than permanent and total disability.

Defendant contends that the WCJ erred in awarding the statutory increase of section 4658(d) and that the medical evidence does not support a combined award as between applicant's two pending claims.

We have received an Answer from defendant to applicant's Petition. The WCJ prepared a Report and Recommendation on Petition for Reconsideration (Report), recommending that both Petitions be denied.

We have considered the allegations of the Petitions for Reconsideration and the contents of the report of the workers' compensation administrative law judge (WCJ) with respect thereto. Based on our review of the record, and for the reasons discussed below, we will grant defendant's

Petition, deny applicant's Petition, amend the F&A to defer the issue of applicant's weekly permanent disability rate and corresponding attorney fees, and return this matter to the trial level for development of the record with respect to the issue of the statutory increase of section 4658(d).

FACTS

Applicant has filed two applications for adjudication. In Case No. ADJ781002, applicant sustained injury to the cervical spine, lumbar spine, right shoulder, left shoulder, bilateral wrists, right knee, left knee, psyche, and internal while employed as a warehouse manager by defendant Master Toys and Novelties from April 29, 2010 to April 29, 2011. In Case No. ADJ7982917, applicant sustained injury to the lumbar spine while employed as a warehouse manager on April 1, 2011.

The parties have selected Thomas Fell, M.D., as the Agreed Medical Evaluator (AME) in orthopedic medicine, Gregory Cohen, M.D. as the QME in psychiatry, and Stanley Majcher, M.D. as the QME in internal medicine.

On April 20, 2022, the parties brought both cases to trial, submitting into evidence treating physician reporting, vocational expert reporting, and the medical-legal reporting of Drs. Fell, Cohen and Majcher. (Minutes of Hearing and Summary of Evidence, April 20, 2022, at p. 5:1.) The parties submitted the matter for decision on issues including permanent disability, apportionment, and attorney fees.

On June 9, 2022, the WCJ issued her Findings and Award.

On July 1, 2022, applicant petitioned for reconsideration of the Findings and Award, and on July 19, 2022, the WCJ issued an Order Vacating Findings and Award and Opinion Decision.

On August 22, 2022, the WCJ conducted an additional hearing. The WCJ provided the parties with a letter addressed to QME Dr. Cohen requesting that the physician further explicate his determination that disability could not be apportioned as between the admitted specific and cumulative injuries. (Letter from the WCJ to Gregory Cohen, M.D., August 22, 2022.) The WCJ provided the parties with a letter to QME Dr. Majcher, outlining similar concerns, and requesting supplemental reporting to address in detail the basis for the physician's opinion. (Letter from the WCJ to Stanley Majcher, M.D., August 22, 2022.) The Minutes reflect the WCJ's provision of a window for objection by either party to the proposed letters, after which time the defendant was directed to submit both letters to the respective physicians. (Minutes of Hearing, August 22, 2022.)

On November 16, 2022, both Dr. Cohen and Dr. Majcher issued supplemental reporting responsive to the WCJ's letter. (Ex. V, Report of Gregory Cohen, M.D., November 16, 2022; Ex. W, Report of Stanley Majcher, M.D., November 16, 2022.)

On June 26, 2023, the WCJ conducted further trial proceedings and admitted the supplemental reporting from Drs. Cohen and Majcher into evidence. (Minutes of Hearing (Further), June 26, 2023, at p. 2:5.)

On August 21, 2023, the WCJ issued an Order Vacating Submission and for Further Development of the Record. The order specified that "further development of the reports of Dr. Gregory Cohen and Dr. Stanley Majcher is necessary … [t]hese reports must comply with the requirements of Labor Code § 4663(c) re: consultation when apportionment cannot be found by the reporting physician and 8 CCR § 10682." (Order Vacating Submission and for Further Development of the Record, August 21, 2023.)

On September 15, 2023, applicant filed a Petition for Removal in response to the WCJ's Order Vacating Submission, averring the reporting of Drs. Cohen and Majcher had adequately addressed the issue of apportionment. (Applicant's Petition for Removal, dated September 15, 2023.)

On November 21, 2023, we granted applicant's Petition for Removal and observed that pursuant to B*enson v. Workers' Comp. Appeals Bd.* (2009) 170 Cal.App.4th 1535 [74 Cal.Comp.Cases 113, 133] (*Benson*), both QME Dr. Cohen and QME Dr. Majcher had described why they could not "parcel out with reasonable medical probability the approximate percentages to which each of applicant's distinct industrial injuries causally contributed to the employee's overall permanent disability." (*Benson, supra*, at p. 133.) Accordingly, we determined that both physicians had made the apportionment determination required by section 4663(c). We rescinded the September 15, 2023 Order Vacating Submission and returned the matter to the WCJ for further proceedings. (Opinion and Order Granting Petition for Removal and Decision After Removal, dated November 21, 2023.)

On January 8, 2024, the WCJ ordered the matter submitted for decision on the existing record. (Minutes of Hearing, date January 8, 2024.)

On March 15, 2024, the WCJ issued her F&A, determining in relevant part that applicant was entitled to a joint award of 76 percent permanent disability, to be paid at a weekly rate that reflected the 15 percent statutory increase of section 4658(d). The WCJ's Opinion on Decision

observed that she found neither the reporting of vocational expert Keith Wilkinson nor that of Nick Corso to be substantial vocational evidence sufficient to rebut the scheduled rating pursuant to the permanent disability rating schedule (PDRS). The WCJ also stated that "although all of applicant's medical-legal doctors released him back to work or modified work from his industrial injuries, applicant testified that he has neither returned to work nor looked for other work since 2011." (Opinion on Decision, at p. 5.) With respect to apportionment, the WCJ determined that both applicant's psychological and hypertension injuries were "inextricably intertwined" between the two dates of injury, thus warranting a joint award. With respect to the permanent disability rate, the WCJ determined in relevant part that "defendant did not meet its burden of proof regarding the offering of modified work per Labor Code § 4658(d)." (Findings of Fact in ADJ7810002 No. 4; Findings of Fact in ADJ7982917 No. 4.)

Applicant's Petition contends the WCJ erred in not relying on the vocational expert reporting of Keith Wilkinson to determine that applicant has lost all future earning capacity and was thus permanently and totally disabled. (Applicant's Petition, at p. 5:7.) Applicant further asserts error in the calculation of the weekly indemnity rate. (*Id.* at p. 6:21.) Applicant also avers injury to the urological system and possible cerebrovascular injury occurring on and after January 8, 2024, the date this case was submitted for decision. (*Id.* at p. 7:5.)

Defendant's Answer to Applicant's Petition (Defendant's Answer) responds that the reporting of Mr. Wilkinson is not substantial evidence because the expert's opinion was not limited to the medical-legal evidence in the record. (Defendant's Answer, at p. 3:15.)

Defendant's Petition for Reconsideration and/or Removal (Defendant's Petition) contends that the statutory increase described in section 4658(d) is inapplicable because the defendant employs less than 50 employees. Defendant further challenges the WCJ's determination that applicant's two injuries were "inextricably intertwined" such that their individual percentages of causation of disability could not reasonably be parceled out. (Defendant's Petition, at p. 8:18.)

DISCUSSION

Applicant contends he has sustained a 100 percent loss of earning capacity and is permanently and totally disabled as a result. (Applicant's Petition, at 5:7.) In support of this contention, applicant avers the reporting of vocational expert Mr. Wilkinson establishes that there are no positions reasonably available in the open labor market for which applicant could be retrained. (*Id.* at p. 5:10.) However, the WCJ's Opinion on Decision noted consensus among the medical-legal evaluators that applicant retained the capacity to gainfully return to the open labor market. (Opinion on Decision, at p. 5.) We also observe that applicant's vocational expert avers his analysis is limited to "[applicant's] bilateral wrist, bilateral shoulder and knees disabilities [which have] made him unemployable." (Ex. 3, Report of Keith Wilkinson, dated December 3, 2020, at p. 14.) However, the analysis of employability in the context of a return to the labor market clearly identifies and relies upon work restrictions and limitations beyond those identified by orthopedic Agreed Medical Evaluator, Dr. Fell. (*Id.* at pp. 8-11; Ex. 2, Report of Keith Wilkinson, dated October 12, 2021, at pp. 4-7; Ex. 1, Report of Keith Wilkinson, dated January 17, 2022, at pp. 6 & 8.) As we observed in *Nunes v. State of California, Dept. of Motor Vehicles* (2023) 88 Cal.Comp.Cases 741 [2023 Cal. Wrk. Comp. LEXIS 30], "[t]he same considerations used to evaluate whether a medical expert's opinion constitutes substantial evidence are equally applicable to vocational reporting." (*Id.* at p. 751.) A vocational report is not substantial evidence when it fails to "set forth in detail the basis for the opinion, and may not rely on facts that are not germane, on inadequate medical histories or examinations, on incorrect legal theories, or on surmise, speculation, conjecture, or guess. (*Id.* at p. 753, citing *Hegglin v. Workmen's Comp. Appeals Bd.* (1971) 4 Cal.3d 162 [36 Cal.Comp.Cases 93].) Accordingly, we discern no good cause to disturb the WCJ's determination that applicant has not rebutted the scheduled rating.

Applicant also avers error in the calculation of the weekly permanent disability rate insofar as the statutory increase of section 4658(d) has been calculated. (Applicant's Petition, at p. 6:21.) Applicant contends the proper weekly permanent disability rate after application of the statutory increase of section 4658(d) should be $310.50 rather than $309.84 awarded by the WCJ. (Petition, at p. 6:21.) While we agree in principle with applicant, we will defer the issue as our decision herein rescinds the WCJ's findings regarding the applicability of section 4658(d) (see discussion with reference to Defendant's Petition, below). Accordingly, the WCJ may wish to revisit the

calculation of the weekly permanent disability rate should she determine that the statutory increase of section 4658(d) is applicable in the first instance.

Applicant also avers the record should be developed with respect to urological complaints and interim cerebrovascular injury(ies) alleged to have been sustained near the time the matter was submitted to the WCJ for decision. (Petition, at p. 7:1.) However, as the WCJ's report observes, the issue of applicant's nonindustrial prostate cancer was brought to the attention of the orthopedic AME in 2012, and the record reflects no additional discovery in this regard since then. Nor does the record offer documentary or other evidence to support additional injuries. In the absence of affirmative evidence speaking to issues of causation and nature and extent of injury with respect to any of the additional body parts alleged in Applicant's Petition, we are not persuaded that further development of the record in this regard is necessary or appropriate. (*Tyler v. Workers' Comp. Appeals Bd.* (1997) 56 Cal.App.4th 389 [62 Cal.Comp.Cases 924]; *Place v. Workmen's Comp. App. Bd.* (1970) 3 Cal. 3d 372 [35 Cal.Comp.Cases 525]; *Zemke v. Workmen's Comp. Appeals Bd.* (1968) 68 Cal. 2d 794 [33 Cal.Comp.Cases 358].) We will deny Applicant's Petition, accordingly.

Defendant's Petition avers the WCJ erred in determining that the statutory increase of section 4658(d) applied to applicant's weekly permanent disability rate. (Defendant's Petition, at p. 6:12.) The WCJ determined in both pending cases that "defendant did not meet its burden of proof regarding the offering of modified work per Labor Code § 4658(d). (Findings of Fact in ADJ7810002 No. 4; Findings of Fact in ADJ7982917 No. 4.)

Section 4658(d)(2) provides:

> If, within 60 days of a disability becoming permanent and stationary, an employer does not offer the injured employee regular work, modified work, or alternative work, in the form and manner prescribed by the administrative director, for a period of at least 12 months, each disability payment remaining to be paid to the injured employee from the date of the end of the 60-day period shall be paid in accordance with paragraph (1) and increased by 15 percent. This paragraph shall not apply to an employer that employs fewer than 50 employees.
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> (Lab. Code, § 4658(d)(2).)

Defendant contends that because the employer had less than 50 employees at the time of applicant's injury, the statutory increase/decrease required under section 4658(d) is inapplicable. Defendant also avers that section 4658 "does not create a presumption that an employer has greater

than fifty (50) employees and the assertion that Defendant has the burden of overcoming such a presumption is inaccurate." (*Id.* at p. 7:1.) We agree.

In the nonbinding[1] panel decision in *Horn v. Oaknoll Condo Assoc.* (June 9, 2015, ADJ1735597) [2015 Cal. Wrk. Comp. P.D. LEXIS 349] we explained:

> Defendant was not required to establish the inapplicability of the 15% bump; the burden of proof rests upon the party holding the affirmative of the issue. (Lab. Code, § 5705.) Section 3202.5 provides that "[a]ll parties and lien claimants shall meet the evidentiary burden of proof on all issues by a preponderance of the evidence." (Lab. Code, § 3202.5.) It is not incumbent upon defendant to establish that the 15% increase does not apply, but rather applicant as the party seeking to be the beneficiary of the increase must establish the facts justifying the increased award. If defendant were seeking a 15% decrease in applicant's permanent disability award under section 4658(d)(3)(A), applicant would not expect[ed] to be required to carry the burden to prove its inapplicability.
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> (*Id.* at pp. 7-8.)

Thus, the burden of proof in asserting entitlement to the statutory increase of section 4658(d) rests with the applicant, who is the party with the affirmative of the issue. (Lab. Code, § 5705.)

Beyond the issue of the burden of proof, however, we also observe that the applicability of section 4658(d) was not raised with specificity at the time of trial. (See Minutes of Hearing and Summary of Evidence, dated April 20, 2022, at pp. 3:1; 4:1.) While the issue of the statutory increase/decrease described in section 4658(d) may be determined without the issue being specifically raised at trial, such a finding requires undisputed evidence to support the claim for the statutory increase in permanent disability benefits. (See *Bontempo v. Workers' Comp. Appeals Bd.* (2009) 173 Cal.App.4th 689 [74 Cal.Comp.Cases 419].) Here, we discern no such undisputed evidence, as the record offers no evidence of the qualifying number of employees of the defendant as of the dates of injury. We are thus persuaded due process requires that the record be developed to address the issue of applicant's entitled to the statutory increase of section 4658(d) with

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1 Unlike en banc decisions, panel decisions are not binding precedent on other Appeals Board panels and WCJs. (See *Gee v. Workers' Comp. Appeals Bd.* (2002) 96 Cal.App.4th 1418, 1425, fn. 6 [67 Cal.Comp.Cases 236].) However, panel decisions are citable authority and we consider these decisions to the extent that we find their reasoning persuasive, particularly on issues of contemporaneous administrative construction of statutory language. (See *Guitron v. Santa Fe Extruders* (2011) 76 Cal.Comp.Cases 228, 242, fn. 7 (Appeals Board en banc); *Griffith v. Workers' Comp. Appeals Bd.* (1989) 209 Cal.App.3d 1260, 1264, fn. 2 [54 Cal.Comp.Cases 145].) Here, we refer to these panel decisions because they considered a similar issue.

specificity. (Lab. Code, § 5701; *Tyler, supra*, 56 Cal.App.4th 389; *McClune v. Workers' Comp. Appeals Bd.* (1998) 62 Cal.App.4th 1117 [63 Cal.Comp.Cases 261].) Accordingly, we will grant Defendant's Petition, and amend Finding of Fact No. 4 in both pending cases to defer the issue of whether the statutory increase or decrease of section 4658(d) is applicable herein.

Defendant also contends the WCJ erred in determining that applicant is entitled to a joint award because QMEs Dr. Cohen and Dr. Majcher were unable to parcel out the respective percentages of disability arising out of each claimed injury. (Defendant's Petition, at p. 9:11.) Defendant avers the QMEs failed to establish what "limited circumstances" existed that precluded their apportionment as between the claimed injury. (*Ibid*., citing *Benson, supra*, 170 Cal.App.4th 1535.) Defendant avers the physicians received an interrogatory regarding the question of apportionment as between the claimed injuries, and acceded to the form of the question, offering a conclusory opinion that both physicians could no longer parcel out the respective percentages of disability attributable to each injury. (*Id.* at p. 10:1.)

However, as we observed in our November 21, 2023 decision granting applicant's Petition for Removal, defendant bears the burden of establishing apportionment. (Opinion and Order Granting Petition for Removal and Decision After Removal, at p. 5; see also *Escobedo v. Marshalls* (2005) 70 Cal.Comp.Cases 604 (Appeals Board en banc).) We stated in our decision:

> Here, Dr. Cohen issued a November 16, 2022 supplemental report addressing *Benson* apportionment. The supplemental report observed that the QME was unable to parcel out the respective percentages corresponding to applicant's specific and cumulative injuries, respectively. (Ex. V, Report of Gregory Cohen, M.D., November 16, 2022, p. 2.) Dr. Cohen observed that a "review of the medical records provided did not show that other treating or evaluating doctors documented any differences in psychiatric symptoms and dysfunction in relation to the cumulative and specific injuries." (*Ibid*.) Following a review of the entire record, including the submitted medical history, prior clinical examinations, and applicant's deposition testimony, Dr. Cohen concluded that "based upon reasonable medical probability, there is insufficient medical evidence to apportion psychiatric impairment with regard to the cumulative and the specific injury," and that "[t]o do so would be speculative." (*Ibid*.)
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> Dr. Majcher's supplemental report, also dated November 16, 2022, similarly reviewed the applicant's medical history, including the relevant treatment records from 2008 to 2011. (Ex. W, Report of Stanley Majcher, M.D., November 16, 2022, pp. 2-3.) Following this review, the QME observed that "there are numerous references to the comments from the orthopedists regarding subjective complaints but the orthopedists do not specify what subjective issues such as

> pain, stress and administration of nonsteroidal anti-inflammatory drugs had been prescribed for which particular injury … This is the reason why I had concluded that the data were inadequate for me to further apportion per *Benson* and I had concluded that the patient's condition was inextricably intertwined." (*Id.* at p. 3.) Dr. Majcher also noted that he had consulted with a colleague, Omar Tirmizi, M.D., and had inquired specifically with respect to the issues related to apportionment arising out of this case. Dr. Majcher noted that following a review and discussion, Dr. Tirmizi had confirmed he "likewise could not apportion further per *Benson* and agreed with me that the issues were inextricably intertwined." (*Ibid*.)
>
> (*Id.* at pp. 6-7.)

Both Dr. Cohen and Dr. Majcher have reasonably explained the basis for their inability to parcel out the permanent disability attributable to each injury and have offered a clear explanation of their reasoning in this regard. Moreover, the validity of their responses is not diminished simply because they responded to interrogatories posed by the parties. Following our independent review of the record occasioned by defendant's Petition, we are not persuaded that the WCJ erred in determining that applicant was entitled to a joint award under the principles espoused in *Benson, supra*, 170 Cal.App.4th 1535. (See also *Nunes, supra*, 88 Cal.Comp.Cases 741, 748-749 ["[w]hen a physician considers all appropriate factors of apportionment but nevertheless determines that it is not possible to approximate the percentages of each factor contributing to the employee's overall permanent disability to a reasonable medical probability, the physician has made the apportionment determination required under section 4663(c)."].)

In summary, and with respect to Applicant's Petition, we agree with the WCJ that applicant has not met his burden of rebutting the scheduled rating. We further agree that development of the record with respect to additional injured body parts/systems is not warranted on the current record. With respect to the Defendant's Petition, we are persuaded that the reporting physicians reasonably described why they were unable to parcel out the percentages of permanent disability otherwise attributable to each of the claimed injuries, thus justifying the issuance of a joint award. However, we are persuaded that with respect to the award of a statutory increase of section 4658(d), the WCJ misapplied the burden of proof, and that due process requires that we return the matter to the trial level for development of the record and decision solely on the issue of the applicability, if any, of section 4658(d) to applicant's weekly permanent disability rate.

Accordingly, we will deny Applicant's Petition. We will grant Defendant's Petition and amend Findings of Fact No. 4 in both cases to reflect that the issue of the statutory increase/decrease of section 4658(d) is deferred. Although we concur with the WCJ's determination as to the percentage of permanent disability sustained, we will necessarily defer the issue of the weekly permanent disability rate in Finding of Fact No. 10 in both cases, and the corresponding award of attorney fees, pending additional proceedings and decision on the issue of section 4658(d).[2]

For the foregoing reasons,

IT IS ORDERED that applicant's petition for reconsideration of the decision of March 15, 2024 is **DENIED**.

IT IS FURTHER ORDERED that defendant's petition for reconsideration of the decision of March 15, 2024 is **GRANTED**.

[2] There appears to be typographical error in the numbering of the Findings of Fact in ADJ7982917 after Findings of Fact No. 10. For the sake of clarity, we will amend Findings of Fact Nos. 10 and 11 with reference to the award of permanent disability and attorney's fees as described above and restate the remaining Findings of Fact in numerical order.

IT IS FURTHER ORDERED as the Decision After Reconsideration of the Workers' Compensation Appeals Board that the decision of March 15, 2024 is **AFFIRMED,** except that is **AMENDED** as follows:

FINDINGS OF FACT

(*ADJ781002*)

…

4. The issue of a statutory increase under Labor Code section 4658(d) is deferred.

…

10. The injuries in ADJ7810002 and ADJ7982917 resulted in permanent disability of 76 percent after apportionment, commencing on January 7, 2014, less credit for sums previously paid on account thereof, less attorney's fees, plus a life pension at the rate of $123.69 per week, less attorney's fees as set forth below. The issue of the weekly rate of payment is deferred, to be adjusted by the parties with jurisdiction to the WCJ in the event of a dispute.
11. Attorney's fees are awarded based on 15% of the permanent disability indemnity awarded; and including 15% of the present value of the accrued and future life pension. Attorney's fees are to be commuted off the side of the award. Attorney's fees are to be held in trust by defendant pending receipt of a fee split agreement and/or court order of distribution. The issue of the amount of attorney's fees is deferred, to be adjusted by the parties with jurisdiction to the WCJ in the event of a dispute.

…

FINDINGS OF FACT

(*ADJ7982917*)

…

4. The issue of a statutory increase under Labor Code section 4658(d) is deferred.

…

10. The injuries in ADJ7810002 and ADJ7982917 resulted in permanent disability of 76 percent after apportionment, commencing on January 7, 2014, less credit for sums previously paid on account thereof, less attorney's fees; plus a life pension at the rate of $123.69 per week, less attorney's fees as set forth below. The issue of the weekly rate of

payment is deferred, to be adjusted by the parties with jurisdiction to the WCJ in the event of a dispute.

11. Attorney's fees are awarded based on 15% of the permanent disability indemnity awarded; and including 15% of the present value of the accrued and future life pension. Attorney's fees are to be commuted off the side of the award. Attorney's fees are to be held in trust by defendant pending receipt of a fee split agreement and/or court order of distribution. The issue of the amount of attorney's fees is deferred, to be adjusted by the parties with jurisdiction to the WCJ in the event of a dispute.
12. Liability for self-procured treatment and liens for medical treatment, medical-legal expenses, and costs pursuant to Labor Code Section 5811 are deferred and ordered off calendar pending a further Declaration of Readiness on those issues by any interested party.
13. There is a need for future medical treatment to cure or relieve the effects of the industrial injuries herein.

…

JOINT AWARD

…

1. Permanent disability of 76 percent after apportionment, resulting in payment to applicant commencing January 7, 2014, less credit for sums previously paid on account thereof; plus a life pension at the rate of $123.69 per week, less attorney's fees as set forth below; the issue of the amount of the award is deferred, to be adjusted by the parties with jurisdiction to the WCJ in the event of a dispute.

2. Attorney's fees are awarded based on 15 percent of the permanent disability indemnity awarded; and including 15 percent of the present value of the accrued and future life pension. Attorney's fees are to be commuted off the side of the award. Attorney's fees are to be held in trust by defendant pending receipt of a fee split agreement and/or court order of distribution. The issue of the amount of attorney's fees is deferred, to be adjusted by the parties with jurisdiction to the WCJ in the event of a dispute.

WORKERS' COMPENSATION APPEALS BOARD

/s/ CRAIG SNELLINGS, COMMISSIONER

I CONCUR,

/s/ ANNE SCHMITZ, DEPUTY COMMISSIONER

/s/ JOSEPH V. CAPURRO, COMMISSIONER

DATED AND FILED AT SAN FRANCISCO, CALIFORNIA

June 7, 2024

SERVICE MADE ON THE ABOVE DATE ON THE PERSONS LISTED BELOW AT THEIR ADDRESSES SHOWN ON THE CURRENT OFFICIAL ADDRESS RECORD.

ANDRES VIZCARRA
SOLOV & TEITELL
TOBIN LUCKS

SAR/abs

I certify that I affixed the official seal of the Workers' Compensation Appeals Board to this original decision on this date. *abs*