State Of California

DIVISION OF WORKERS' COMPENSATION WORKERS' COMPENSATION APPEALS BOARD

WILMAR BLANCO

Case No. ADJ10010635 (MF) ADJ8993446

Applicant,

VS.

COASTAL EMPLOYMENT, INC.; TWIN CITY FIRE INSURANCE, ADMINISTERED BY THE HARTFORD

Defendants.

FINDINGS OF FACT AND ORDER

REHAB SOLUTIONS

By: Loretta Young, Hearing Representative For Lien Claimant

BRADFORD & BARTHEL

By: Claire E. Carson, Esq. Attorneys for Defendant

Application having been filed herein, all parties having appeared, and the matter having been regularly submitted, the Honorable S. MICHAEL COLE, Workers' Compensation Judge, finds and orders as follows:

FINDINGS OF FACT

1. The applicant, Wilmar Blanco, born 1/6/84, was not employed by Coastal Employment, Inc. as a shipping and receiving clerk, on 8/15/12 (ADJ8993446), or during the period from 2/1/12 through 11/2/12 (ADJ10010635).

State Of California DIVISION OF WORKERS' COMPENSATION WORKERS' COMPENSATION APPEALS BOARD

- 2. Lien claimant, Rehab Solutions, has failed to prove that applicant sustained injuries to his back, trunk, knees, neck (due to stress) and wrist (left/right unspecified) as alleged on 8/15/12 (ADJ8993446), or during the period from 2/1/12 through 11/2/12 (ADJ10010635).
- 3. Lien claimant, Rehab Solutions, has failed to prove by a preponderance of the evidence that the treatment services it provided to the applicant were reasonable or necessary.

ORDER

IT IS ORDERED that the lien of Rehab Solutions is disallowed in its entirety. Lien claimant shall take nothing.

S. MICHAEL COLE

Workers' Compensation Judge

DATED: 6/13/16
Filed and Served by mail on above date on all parties on the Proof of Service.

B.,,

By:

WCAB CASE NUMBERS ADJ19919635 & ADJ8993446

WILMAR BLANCO

Applicant

VS.

COASTAL EMPLOYMENT, INC.

Employer

TWIN CITY FIRE INSURANCE

Insurance Company

Workers' Compensation Judge: S. Michael Cole

Dates of Injury: CT: 2/1/12 through 11/2/12; SP: 8/15/12

OPINION ON DECISION

BACKGROUND:

Applicant, Wilmar Blanco, born 1/6/84, was allegedly employed by Coastal Employment, Inc. as a shipping and receiving clerk. At some unspecified time, applicant filed claims herein alleging that he sustained a specific injury on 8/15/12 (ADJ8993446) and during the continuous trauma period from 2/1/12 through 11/2/12 (ADJ10010635). In both cases applicant claimed injuries to his back, trunk, knees, neck (due to stress) and wrist (left/right unspecified).

It is unknown when the claims were filed with the employer, or when the applications herein were filed with the WCAB. The parties did not request that the undersigned take judicial notice of the EAMS filings.

The employer has denied employment and injury, with statute of limitations claimed as a bar to compensation. Claim denial letters are in evidence herein dated 11/1/13 (Defendant Exhibits A&B).

According to the parties' trial stipulations, applicant's underlying claims were settled by way of a Joint Compromise and Release for \$7,000.00 with an Order Approving issuing on 6/25/15 by WCJ Michael Greenberg.

The matter has returned to the trial calendar before the undersigned on 5/25/16 relating solely to the lien of Rehab Solutions.

EMPLOYMENT:

Lien claimant has the burden of proof in establishing all factors of compensability relating to applicant's claim, as well as its entitlement to payment for any treatment provided. Defendant has

denied employment. Applicant was not subpoenaed to testify at trial regarding his employment relationship, if any, with Coastal Employment, Inc. No employment records or payroll records were offered into evidence. No alleged employer witnesses were called at trial to confirm applicant's alleged employment.

There is very limited potential evidence in the record relating to employment. There is an undated doctor's first report from Roland Lopez, M.D. that references a first examination on 12/13/12 (Lien Claimant Exhibit R7) and which notes a specific injury four months earlier to the low back. The employer is listed as "Costal Employment". Applicant's job title/position is blank. Despite minimal objective findings, as well as concluding that applicant could return to his usual and customary job duties, Dr. Lopez recommended treatment in the form of physical therapy two times a week for six weeks, acupuncture two times a week for six weeks, topical compound creams, a lumbar MRI, lower extremity EMG/NCS testing, a heat pad, a cold therapy unit, a TENS unit, a back support, and a pain management referral. The medical record then goes quiescent for a year until a PR-2 from Miles Suarez, D.C. from 12/10/13 once again only references a specific injury date without any purported mechanism of injury, with no occupation listed for the applicant, but with complaints now to the lumbar, neck, and shoulder (Lien Claimant Exhibit R12).

Lien claimant has the burden of proof in establishing all components of its claim that it is entitled to payment for the treatment services provided, including employment, injury, reasonableness of treatment, and reasonableness of valuation of services provided. L.C. §3202.5 requires proof by a preponderance of the evidence.

Based on the foregoing, and upon review of the entire record, it is found that lien claimant has failed to establish by a preponderance of the evidence that applicant was employed by Coastal Employment, Inc. as alleged.

INJURY: AOE/COE:

Defendant has denied that applicant sustained either a specific or a continuous trauma injury as alleged. As noted above, applicant did not testify at trial to support either claimed injury. Lien claimant has the burden of proof in establishing by a preponderance of the evidence that applicant sustained compensable injury(s) as alleged pursuant to L.C. §3202.5.

With respect to the alleged continuous trauma claim (ADJ10010635), there is no evidence whatsoever in the record evidencing that applicant sustained any type of continuous trauma injury. With

respect to the claimed specific injury claim (ADJ8993446), no competent and substantial narrative reporting was offered into evidence to support such an injury. The only possible evidence on the issue of causation of injury herein is limited to a hearsay one line notation contained in an undated doctor's first report that references "pulling a pallet". The undersigned does not find this substantial.

Based on the foregoing it is found that lien claimant has failed to prove by a preponderance of the evidence that applicant sustained a compensable specific or continuous trauma injury as alleged.

LIEN OF REHAB SOLUTIONS:

Lien claimant, Rehab Solutions, has filed a lien relating to the provision of an interferential current therapy device to the applicant on 1/22/13, with follow up monthly supplies through 4/22/14 in the total billed amount of \$15,105.00.

Defendant has submitted into evidence a request for authorization for a TENs unit from Roland Lopez, M.D. from 12/13/12, which was included in the itemized billing and lien from another medical provider, Prime Medical Resources, which billed \$4,097.00 for its purported provision of a dual IF unit to the applicant during the period from 12/31/12 through 7/1/13 (Defendant Exhibits C & D). This purported treatment appears to overlap with lien claimant, Rehab Solution's, dates of service.

Lien claimant has the burden of proof in establishing by a preponderance of the evidence that the treatment it provided to the applicant was reasonable and necessary. Based on the limited reporting herein, as well as the apparently redundancy in treatment modalities, and the fact that substantial treatment was inexplicably recommended on applicant's first treatment visit despite very limited findings and a determination that he could return to work without any restrictions, it is found that lien claimant has failed to prove that the treatment it provided was reasonable or necessary.

Based on the foregoing, it found that lien claimant shall take nothing herein.

S. MICHAEL COLE

Workers' Compensation Judge

DATED: 6/13/16

Filed and Served by mail on above date on all parties on the

Proof of Service.

By: Jeninatoro-

STATE OF CALIFORNIA DEPARTMENT OF INDUSTRIAL RELATIONS DIVISION OF WORKERS' COMPENSATION

06-13-2016

PROOF OF SERVICE

FINDINGS OF FACT AND ORDER WITH OPINION ON DECISION

Case Number: INT10010635

BRADFORD BARTHEL

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HARTFORD SACRAMENTO

Claims Administrator, PO BOX 14475 LEXINGTON KY 40512

REHAB SOLUTIONS

IRVINE

Lien Claimant - Other, 16520 ASTON ST IRVINE CA 92606,

STACYH@REHABSOLUTIONS.US.COM

Filed and Served by mail on all parties listed above.

DATED: 6/13/16

BY: