9549 TRC BEFORE THE WORKERS' COMPENSATION COURT OF EXISTING CLAIMS STATE OF OKLAHOMA

FILED

In re claim of:

WORKERS' COMPENSATION COURT STATE OF OKLAHOMA October 16, 2015 Katrina Stephenson COURT CLERK

DANIEL HAAS

Claimant

CITY OF BROKEN ARROW Respondent Court Number: 2014-05469A

Claimant's Social Security Number: xxx-xx-7552

CITY OF BROKEN ARROW (OWN RISK #14157)

Ins. Carrier

ORDER AWARDING THE NATURE AND EXTENT OF PERMANENT PARTIAL IMPAIRMENT BENEFITS

)

Now on this 7th day of OCTOBER, 2015, this cause came on for consideration pursuant to regular assignment and hearing on SEPTEMBER 28, 2015, before JUDGE MICHAEL W MCGIVERN, at Tulsa, Oklahoma, at which time claimant appeared in person and by counsel, BRYAN L SMITH appearing for ESTHER M SANDERS and respondent and insurance carrier appeared by counsel, TRAVIS R COLT appearing for LEAH P KEELE.

The Court having considered the evidence and records on file, and being well and fully advised in the premises FINDS AND ORDERS AS FOLLOWS:

THAT on JANUARY 30, 2014, claimant was employed by the above named respondent and such employment was subject to and covered by the provisions of the Workers' Compensation Code of the State of Oklahoma; and on said date claimant sustained accidental personal injury to the LOW BACK (aggravation of a pre-existing condition) arising out of and in the course of claimant's employment.

-1-

- 2 -

THAT at time of injury, claimant's wages were sufficient to establish the rates of compensation at \$753.12 per week for temporary total disability and \$323.00 per week for permanent partial impairment.

THAT as a result of said injury, claimant was paid temporary total disability benefits from NOVEMBER 15, 2014 to APRIL 24, 2015.

- 4 -

THAT as a result of said injury, respondent is entitled to credit for overpayment of temporary total disability compensation from MARCH 3, 2015 to APRIL 24, 2015, a period of 7 weeks and 3 days in the amount of \$5,723.71 to be deducted from the latter end of the award herein.

- 5 -

THAT additional overpayment of temporary total disability is reserved for a future hearing not longer than thirty (30) days from the date of this order.

- 6 -

THAT as a result of said injury, claimant sustained 10 percent permanent partial impairment to the LOW BACK (injections- epidural steroid injections, sacroiliac injections, L4-5 small annular disruption, L5-S1 larger annular disruption with an extended portion of his apophyscal ring, range of motion loss, weakness) over and above 13 percent pre-existing permanent partial disability, for which claimant is entitled to compensation for 50 weeks at \$323.00 per week, or the total amount of \$16,150.00 of which 31 weeks have accrued and shall be paid in a lump sum \$10,013.00.

- 7 -

THAT the Court denies respondents request for reimbursement of \$250.00 for missed appointment on JANUARY 27, 2015. Claimant testified he called and advised said doctor that he would not make said appointment. He in fact saw the doctor three days later. The Court excuses this missed appointment.

- 8 -

THAT respondent and/or insurance carrier shall pay all reasonable and necessary medical expenses incurred by claimant as a result of said injury.

- 9 -

THAT respondent or insurance carrier shall pay claimant the accrued portion of the award herein in lump sum of \$10,013.00 and pay the balance of said award at the rate of \$323.00 per week until the total award of \$16,150.00 (less attorney fee and credit due respondent) has been paid to claimant.

-10 -

THAT Respondent shall pay court costs; Special Occupational Health and Safety Fund Tax of three-fourths of one percent (0.75%) of the amounts paid in lump sum of \$121.13 is levied against the Respondent; three-fourths of one percent of the continuing benefits awarded in this case shall be computed and paid as the same comes due. Pursuant to 85 O.S., Section 407, as amended by Laws 2013, HB 2201, c. 254, Section 49, eff. January 1, 2015, Respondent, if Own Risk, shall pay \$323.00 to the Workers' Compensation Administration Fund created by 85 O.S. Section 407, to be used for the costs of administering the Workers' Compensation Code as applicable to the Oklahoma Workers' Compensation Court of Existing Claims, representing two percent (2%) of the permanent disability award herein.

- 11 -

THAT pursuant to Title 85 O.S. Section 368, a final award fee of one hundred forty dollars (\$140.00) is taxed as a cost in this matter, and shall be paid by respondent.

- 12 -

THAT the sum of \$3,230.00 shall be deducted from the award herein and paid in lump sum to claimant's attorney as a fair and reasonable attorney fee; within twenty (20) days from the date of filing of this order, respondent or insurance carrier shall comply herewith.

BY ORDER OF:

MICHAEL W MCGIVERN, JUDGE

pg/FBennett

A copy of the above and foregoing Court Order was mailed, by regular or Certified United States Mail, on this filed stamped date to:

Claimant's Attorney:

ESTHER M SANDERS 1015 SOUTH DETROIT AVE. TULSA, OK 74120-

RICH S TOON JR 1800 S BALTIMORE AVE STE 1000 TULSA, OK 74119-5223

Respondent's Attorney:

LEAH P KEELE 10441 S REGAL BLVD STE 200 TULSA, OK 74133-

I do hereby certify that the above and foregoing is a true and correct copy of the original order signed by the Judge herein. Witness by my hand and the official seal of this court on this date.

a Suplement

Court Clerk October 16, 2015

SEAL