Kobeyishi.

WORKERS' COMPENSATION APPEALS BOARD STATE OF CALIFORNIA

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JOSE ZUNIGA.

Self-Insured.

Applicant,

VS.

Defendant.

COUNTY OF LOS ANGELES, Permissibly

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¹ Further statutory references are to the Labor Code.

Case Nos. ADJ8610355 MF ADJ8610360 (Van Nuys District Office)

> OPINION AND DECISION AFTER RECONSIDERATION

We previously granted defendant's petition for reconsideration of the September 19, 2013 Findings Of Fact And Award of the workers' compensation administrative law judge (WCJ) who found in ADJ8610355 that applicant incurred industrial injury to his spine, knees, cardiovascular system and in the form of sleep disorder while employed by defendant as a deputy sheriff during the period from May 15, 2006 through June 30, 2008, causing 74% permanent disability after apportionment, and a need for medical treatment. In ADJ8610360 the WCJ found that applicant incurred industrial injury to those same body parts, except his knees, while in that same employ on June 30, 2008, causing 64% permanent disability after apportionment, and a need for medical treatment. The WCJ further found that defendant failed to meet its burden of proving that it is entitled to credit for duplication or overpayment of Labor Code section 4850 salary continuation benefits and temporary disability indemnity benefits during the period from August 13, 2010 through February 8, 2012.1

Defendant contends that the WCJ did not properly apply apportionment of permanent disability between the two injuries as described in *Benson v. Workers' Comp. Appeals Bd.* (2009) 170 Cal.App.4th 1535 [74 Cal.Comp.Cases 113] (*Benson*), and that the WCJ should have allowed credit for overlapping payments of section 4850 benefits and temporary disability indemnity.²

An answer to defendant's petition was received from applicant.

The WCJ provided a Report and Recommendation on Petition for Reconsideration (Report) recommending that reconsideration be denied.

The WCJ's September 19, 2013 decision is affirmed, but amended, as our Decision After Reconsideration. The WCJ correctly concluded under the circumstances of this case that applicant was entitled to two periods of section 4850 and temporary disability indemnity benefits. In addition, section 4663(e) precludes apportionment of the permanent disability caused by applicant's back and cardiovascular condition between the two injury claims. However, under the unique circumstances of this case as discussed below, we issue a single combined permanent disability award.

BACKGROUND

The WCJ describes the underlying facts in his Report as follows:

"Applicant, Jose Zuniga, born 7/22/69, worked as a deputy sheriff for the County of Los Angeles for approximately nine years. In 2006 he was reassigned to patrol duties and remained in that position through his last day of work on 7/5/08. Applicant sustained a specific injury to his lumbar spine on 6/30/08 (ADJ8610360). From the history contained in the submitted medical reporting, it appears that applicant did not report the injury until a few days later. Applicant subsequently claimed additional injuries related to the specific injury in the form of hypertensive cardiovascular disease and sleep.

"Applicant also filed a continuous trauma claim covering the period from 5/15/06 through the specific injury of 6/30/08, with injuries to the identical body parts claimed in the specific injury (ADJ8610355). A third claim, also a continuous trauma claim, which covered the same continuous trauma period, was later filed alleging injury to applicant's bilateral knees

² Attached to defendant's petition is an excerpt of the June 5, 2010 transcript of the deposition of Robert Samson, M.D., that was not offered or received into evidence at trial. Defendant is admonished that attachment of that document to the petition was improper, and it was not considered upon reconsideration. (See Cal. Code Regs., tit. 8, §§ 10600, 10842.)

Also attached to defendant's petition are copies of documents that have already been received into evidence, or that have already been made part of the legal file. Such documents are not to be attached as exhibits to answers to petitions for reconsideration. (Cal. Code Regs., tit.8, §10842.)

(ADJ6498650). At trial herein, the parties stipulated that the two continuous trauma claims were really a single injury, and as a result, 'knees' were added as an admitted body part to ADJ8610355, and ADJ6498650 was dismissed as redundant pursuant to Cal. Reg. §10770.

"Applicant has not returned to work for the employer since 7/5/08. He was originally taken off work by his then treating physician relating to his back injury. Applicant received L.C. §4850 salary continuation benefits, relating to the specific injury claim, from 7/6/08 through 7/5/09, and then temporary disability benefits from 7/6/09 through 6/16/10. While still on temporary disability, the parties agreed to utilize agreed medical evaluators in the fields of orthopedics, internal medicine and neurology/sleep to address the contested issues. When the orthopedic AME initially evaluated the applicant on 1/29/09, 'knees' were not discussed or evaluated (Board Exhibit 4). When applicant was evaluated by the same AME on 8/20/09, he concluded that applicant's knee complaints were not work related (Board Exhibit 5). The AME's opinion relating to the knees changed however in subsequent reporting dated 3/19/10 (Board Exhibit 7).

"Following the finding by the orthopedic AME that applicant's knee injuries were a compensable component of applicant's continuous trauma injury, applicant subsequently underwent left knee arthroscopic surgery on 10/1/10 consisting of partial medial and lateral meniscectomies, chondroplasty of the patellofemoral joint and medial compartment, and a three compartment synovectomy/debridement. Almost a year later, on 9/9/11, a nearly identical procedure was performed on his right knee. During this period, defendant paid the applicant a second period of L.C. §4850 salary continuation from 8/13/10 through 8/12/11, and temporary disability from 8/13/11 through 3/2/12. At trial the parties stipulated that defendant was entitled to credit for temporary disability overpayment during the period from 2/9/12 through 3/2/12. In addition, defendant was seeking credit for claimed duplicative/overpayment of L.C. §4850 salary continuation and temporary disability benefits beyond a single 104 week cap.

"The undersigned concluded in part that (1) applicant sustained two distinct periods of temporary disability, one relating solely to his initial specific back injury (ADJ8610360), and the second period relating solely to his subsequent knee surgeries (ADJ8610355), and (2) applicant's lumbar disability was not subject to apportionment between the two industrial injuries.

"It is from these two findings that defendant has petitioned for reconsideration."

Following the trial of the two claims on May 8, 2013, the WCJ issued his September 19, 2013 decision as described above. In his Report, the WCJ explains the reasons he found no basis for apportionment of permanent disability between the two injuries as described *Benson* in pertinent part as follows:

"The undersigned disagrees with defendant's argument that the antiattribution components of applicant's claims can be apportioned between the two industrial injuries herein.

"The majority of applicant's disability herein relates to his lumbar spine and the hypertensive cardiovascular disease, both of which are subject to anti-attribution statutes and L.C. §4663(e). Only the disability associated with applicant's bilateral knees and in the form of sleep [disorder] are not subject to those apportionment limitations. The undersigned provided rating instructions to the Disability Evaluation Unit [DEU] specialist to apportion these latter two components of applicant's injuries between industrial and non-industrial factors, combine their respective components with the unapportioned lumbar and cardio components, and then split the money associated with that portion of each award that was duplicative/overlapping, i.e. the cardio and lumbar components, in order to avoid duplication of benefits. There was no objection made to the DEU ratings or any request to cross-examine the rater. Although one award is for 62 percent, and the other for 74%, the weekly benefit rates are split in half during that portion of each award that is duplicative. As a result, the

total dollar amount of the combined awards is equivalent to a single 74% award. Defendant correctly points out that 10% of the 5 percent sleep impairment was apportioned to the specific injury, however when the resulting 1% was combined with the other impairment factors it did not change the overall rating for the specific injury, i.e. 52 C 21 C 1 results in 52 C 21 = 62, and 62 C 1 still equals 62%." (Bracketed material added.)

The WCJ further explains in his Report why he determined that defendant was not entitled to the additional credit it claims for its alleged overpayment/duplication of section 4850 and temporary disability benefits in pertinent part as follows:

"The parties stipulated that defendant was entitled to credit for TTD [temporary total disability] overpayment from 2/9/12 through 3/2/12. Defendant also contended that it was entitled to credit for claimed duplicative/overpayment of L.C. §4850 salary continuation and temporary disability benefits beyond a single 104 week benefit cap pursuant to L.C. §4656(c)(2). Applicant disagreed, as did the undersigned.

"Defendant has the burden of proof pursuant to L.C. §3202.5 in proving by a preponderance of the evidence that an overpayment has been made, and that the court should exercise its discretion in allowing a credit for any overpayment. In this case(s), defendant's position is that the first period of temporary disability, when applicant initially went off work in 2008, was due to both the specific and the continuous trauma injuries. As a result, defendant contends that when it paid another full year of salary continuation and over a half year of additional temporary disability benefits, it did so in err [sic] and outside the statutory cap. Such a credit, if allowed, would be well in excess of \$100,000.00 and would essentially eliminate most of applicant's permanent disability awards herein.

However, the undersigned did not need to address the issue of equity and whether it would be proper to exercise the court's discretion in allowing such a credit, as the evidence did not support defendant's position in any case.

"Dr. Robert Meth (Board Exhibits 1-3), addressing applicant's hypertensive cardiovascular disease and sleep injuries, persuasively concluded that applicant was never temporarily totally disabled due to those components of his claims. As a result, the only basis for applicant's period of temporary disability was his orthopedic injuries.

"A review of the submitted orthopedic AME reports, from Robert Samson, M.D. (Board Exhibits 4-13), as well as the record reviews contained in those reports, fails to establish that that an overpayment was made. Applicant stopped working following the 6/30/08 specific lumbar injury. Salary continuation and subsequently temporary disability benefits were paid relating to that injury only. Summaries of the initial treating physicians' reporting contained in the submitted AME reports, show that applicant was placed on light duty and then total disability due to the specific injury. Report summaries note that his disability is 'due to the industrial injury in question', with only the specific injury identified in the

report summaries (See WCAB Exhibit 4, pages 2, 6, and 8). Summaries of subsequent treating physician reports either note only the specific injury and continuing temporary disability, or the reporting is silent on the cause.

"The first reference to knee complaints is not until a year after the applicant initially went off work. The orthopedic AME, Robert Samson, M.D., originally concluded that any knee complaints were not industrial (Board Exhibit 4). Although he subsequently changed his mind relating to industrial causation (Board Exhibit 7), he also concluded in his 8/26/10 report that applicant's knee injuries had not kept him from working in the past (Board Exhibit 8, page 3). Applicant then underwent staged bilateral knee surgeries resulting in the second period of temporary disability. Defendants properly paid for the new period of salary continuation and temporary disability under the continuous trauma claim, which is the only claim that involved the knees." (Bracketed material added.)

DISCUSSION

For the reasons expressed by the WCJ in his Report, we agree that defendant is not entitled to additional credit beyond the amount stipulated at trial for its payment of section 4850 and temporary disability indemnity benefits because the WCJ correctly determined that applicant incurred two periods of temporary disability as a consequence of separate injuries as discussed in the Report.

However, applicant's claims present an unusual fact pattern because of the delayed recognition of cumulative industrial injury to applicant's knees. Payment for the first period of temporary disability was made because of the specific injury to applicant's back on June 30, 2008. When the AME

Dr. Samson changed his opinion in his March 19, 2010 report and concluded that applicant also incurred cumulative trauma injury to his knees, applicant sustained the subsequent period of temporary disability in connection with the surgery performed on the left knee on October 1, 2010, and the surgery performed on the right knee on September 9, 2011.

But even if applicant had not incurred the subsequent period of temporary disability due to the injury to his knees, we would disallow defendant credit for its alleged overpayment. Section 4909 authorizes the Appeals Board to award a defendant credit for payments made during a time period that there was not a legal obligation to do so.³ (Maples v. Workers' Comp. Appeals Bd. (1980) 111 Cal.App.3d 827 [45 Cal.Comp.Cases 1106].) However, it has long been recognized that it is appropriate for the WCAB to exercise its discretion and deny some or all of the credit claimed when a large overpayment is made without fault of the employee. (Ibid; Herrera v. Workmen's Comp. Appeals Bd. (1969) 71 Cal.2d 254 [34 Cal.Comp.Cases 382]; Genlyte Group, LLC v. Workers' Compensation Appeals Board (Zavala) (2008) 158 Cal.App.4th 705 [73 Cal.Comp.Cases 6]; California Indem. Ins. Co. v. Workers' Comp. Appeals Bd. (Estrella) (2003) 68 Cal.Comp.Cases 233 (writ denied); County of Sacramento v. Workers' Comp. Appeals Bd. (Stapp) (1999) 64 Cal.Comp.Cases 788 (writ deni.).) In this regard, credit has been denied when the allowance of credit would create a hardship for the injured employee. (California Indem. Ins. Co. v. Workers' Comp. Appeals Bd. (Estrella) (2003) 68 Cal.Comp.Cases 233 (writ denied).)

Here, defendant voluntarily made the payments to applicant without fault on his part. The amount of the alleged overpayment is large and would deprive applicant of the substantial part of the permanent disability indemnity that is due because of his injuries, and would undoubtedly cause him hardship. Under these circumstances, it would be appropriate to disallow credit in this case in our

Section 4909 provides in full: "Any payment, allowance, or benefit received by the injured employee during the period of his incapacity, or by his dependents in the event of his death, which by the terms of this division was not then due and payable or when there is any dispute or question concerning the right to compensation, shall not, in the absence of any agreement, be an admission of liability for compensation on the part of the employer, but any such payment, allowance, or benefit may be taken into account by the appeals board in fixing the amount of the compensation to be paid. The acceptance of any such payment, allowance, or benefit shall not operate as a waiver of any right or claim which the employee or his dependents has against the employer." (Emphasis added.)

discretion even if we disagreed with the WCJ that applicant was entitled to receive the subsequent set of section 4850 and temporary disability indemnity benefits paid by defendant.

Turning to the issue of apportionment, we also agree with the WCJ's reasoning in his Report that section 4663(e) precludes apportionment of the permanent disability caused by applicant's back and cardiovascular conditions.⁴ This is a result of the legislative presumption that injuries to certain body parts arise out of and are incurred in the course of the worker's employment as a peace officer. (Department of Corrections & Rehabilitation v. Workers' Comp. Appeals Bd. (Alexander) (2008) 166 Cal.App.4th 911 [73 Cal.Comp.Cases 1294].) The effect of those statutory presumptions has been construed by the Appeals Board to preclude apportionment of permanent disability to separate dates of injuries because the statues do not allow permanent disability to be parceled out based upon its cause. (Delia v. County of Los Angeles (2010) Cal. Work. Comp. P.D. LEXIS 282; see also, Brodie v. Workers' Comp. Appeals Bd. (2007) 40 Cal.4th 1313, 1321 [72 Cal.Comp.Cases 565] ["[T]he new approach to apportionment is to look at the current disability and parcel out its causative sources – nonindustrial, prior industrial, current industrial – and decide the amount directly caused by the current industrial source."].)

The WCJ correctly concluded that the permanent disability caused by the injuries to applicant's back and cardiovascular system was not subject to apportionment. However, we do not agree with his allocation of the permanent disability indemnity due applicant to separate awards. Instead, we find that a single combined award should issue for the permanent disability caused by the injury to those body parts.

In Benson, the Court noted that there were circumstances where a combined award may issue, writing as follows:

"We also agree that there may be limited circumstances, not present here, when the evaluating physician cannot parcel out, with reasonable medical probability, the approximate percentages to which each distinct industrial injury causally contributed to the employee's overall permanent disability.

⁴ Section 4663(a) provides that "Apportionment of permanent disability shall be based on causation." However, section 4663(e) limits that requirement and provides that subdivision (a) "shall not apply to injuries or illnesses covered under sections 3212, 3212.1, 3212.2, 3212.3, 3212.4, 3212.5, 3212.6, 3212.7, 3212.8, 3212.85, 3212.9, 3212.10, 3212.11, 3212.12, 3213, and 3213.2," which preclude apportionment of permanent disability for peace officers, like applicant, when the injury is to certain specified body parts, including the back and cardiovascular system as found in these cases.

In such limited circumstances, when the employer has failed to meet its burden of proof, a combined award of permanent disability may still be justified." (*Benson*, *supra*, 170 Cal.App.4th at 1560.)

Like the situation identified in *Benson* where the evaluating physician cannot parcel out the causes of permanent disability, the anti-attribution statutes in this case preclude the parceling out of permanent disability caused by the injuries to applicant's back and cardiovascular system. The fact that the cumulative and specific injuries to those body parts and the accompanying sleep disorder intertwine and overlap the two claims, and were contemporaneously caused, further supports the issuance of a single award of permanent disability in this case. A combined award also assures that applicant obtains the full level of permanent disability caused by his injuries while assuring that defendant is held liable only for the permanent disability caused by those injuries.

The combined award we substitute for the WCJ's September 19, 2013 decision in this case follows the apportionment of the knee and sleep disorder conditions as applied by the WCJ. But instead of issuing separate awards, the permanent disability caused by those conditions is combined into a single award with the unapportioned permanent disability caused by the injuries to the back and cardiovascular system, using the following formula that was adapted from the formula used by the DEU specialist:

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04.01.00.00 - 34 - [5]43 - 4901 - 52 - 52 PD (A)

15.03.02.03 - 12 - [5] 15 - 4901 - 21 - 21 PD (A)

75% (17.05.06.00 - 10 - [2] 11 - 4901 - 16 - 16) 12 PD (A)

85% (17.05.06.00 - 11 - [2] 13 - 4901 - 18 - 18) 15 PD (A)

80% (13.03.00.00 - 5 - [6]7 - 4901 - 11 - 11) 9 PD (A)

(A) 52 C 21 C 15 C 12 C 9 = 75 FINAL PD
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The above formula yields a final combined permanent disability value of 75%, and that is what we substitute for the two awards issued by the WCJ. In addition, we make some minor technical changes in the form of the findings and the award of attorney's fees is modified to allow 15% of the awarded permanent disability indemnity to be commuted from the side of the award as reasonable attorney's fees, with the exact amount to be adjusted by the parties or determined by the WCJ as appropriate.

For the foregoing reasons,

IT IS ORDERED as the Decision After Reconsideration of the Workers' Compensation Appeals Board that the September 19, 2013 Findings Of Fact And Award of the workers' compensation administrative law judge is RESCINDED and the following is SUBSTITUTED in its place:

FINDINGS OF FACT

- 1. ADJ8610360 (SP: 6/30/08): The applicant, Jose Zuniga, born , while employed on 6/30/08, as a Deputy Sheriff, occupational group number 490, at Monterey Park, California, by the County of Los Angeles, sustained injury arising out of and occurring in the course of employment to his lumbar spine, and in the form of hypertensive cardiovascular disease and sleep disorder.
- 2. ADJ8610355 (CT: 5/15/06 to 6/30/08): The applicant, Jose Zuniga, born while employed during the period from 5/15/06 through 6/30/08, as a Deputy Sheriff, occupational group number 490, at Monterey Park, California, by the County of Los Angeles, sustained injury arising out of and occurring in the course of employment to his lumbar spine, bilateral knees, and in the form of hypertensive cardiovascular disease and sleep disorder.
- 3. Applicant's earnings at the time of injury were \$1,602.13 per week, sufficient to produce a temporary disability rate of \$986.69 per week and a permanent partial disability rate at the statutory rate.
 - 4. Applicant has been adequately compensated for all periods of temporary disability claimed.
- 5. Defendant is entitled to credit for temporary disability overpayment in ADJ8610355 for all benefits paid during the period from 2/9/12 through 3/2/12. Defendant has failed to meet its burden of proof that it is entitled to credit for duplication or overpayment of L.C. §4850 salary continuation and temporary disability benefits paid during the period from 8/13/10 through 2/8/12.
- 6. The impairment relating to applicant's admitted hypertensive cardiovascular disease injury is not subject to apportionment, either to non-industrial factors, or between the two industrial injuries herein, pursuant to L.C. §3213.2 and L.C. §4663(e).
- 7. The impairment relating to applicant's lumbar spine injury is not subject to apportionment, either to non-industrial factors, or between the two industrial injuries herein, pursuant to L.C. §3213.2 and L.C. §4663(e).

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- 8. With respect to applicant's right knee, there is a legal basis for apportionment of 85% to industrial injury and 15% to non-industrial "other factors" pursuant to L.C. §4663.
- 9. With respect to applicant's left knee, there is a legal basis for apportionment of 75% to the industrial injury and 25% to non-industrial "other factors" pursuant to L.C. §4663.
- 10. With respect to applicant's admitted injury in the form of sleep disturbance, there is a legal basis for apportionment of applicant's sleep impairment of 80% to industrial injury, and 20% to "other factors" pursuant to L.C. §4663.
- 11. Applicant's attorney has performed reasonable services relating to applicant's award of permanent disability benefits and is entitled to 15% of the permanent disability indemnity benefits awarded as a reasonable attorney's fee, to be commuted from the side of the award.
- 12. Applicant is entitled to further medical treatment to cure or relieve from the effects of the injuries herein.
- 13. Jurisdiction is reserved over any outstanding medical-legal and/or self-procured treatment lien claims with the parties to attempt informal resolution of the same, or to be determined in supplemental proceedings upon the filing of a Declaration of Readiness to Proceed.
- 14. The permanent disability caused by applicant's injuries is inextricably intertwined, causing combined permanent disability of 75 percent, equivalent to 513.25 weeks of indemnity payable at the rate of \$270.00 per week, in the total sum of \$138,577.50, payable commencing on 6/17/10, and continuing thereafter as a life pension of \$115.96 per week for life subject to statutory Labor Code section 4659(c) SAWW COLA adjustments, less credit for amounts heretofore paid by defendant on account thereof, less credit to defendant for temporary disability overpayment during the period from 2/9/12 through 3/2/12 and less a 15% reasonable attorney's fee commuted from the side of the award payable to applicant's attorney Straussner Sherman, with the exact amount of all sums to be adjusted by the parties or determined by a workers' compensation administrative law judge if they are unable to do so.

AWARD

AWARD IS MADE in favor of Jose Zuniga against the County of Los Angeles as follows:

- (a) Permanent disability indemnity payable as set forth in Finding 14 above.
- (b) Further medical treatment as set forth in Finding 12 above.
- (c) Reimbursement of self-procured medical treatment and medical-legal costs as set forth in Finding 13 above.
- (d) Attorney fees payable as set forth in Findings 11 and 14 above.

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IT IS FURTHER ORDERED as the Decision After Reconsideration of the Workers' Compensation Appeals Board that the case is RETURNED to the trial level for such further proceedings and decision by the workers' compensation administrative law judge as may be appropriate in accordance with this decision. WORKERS' COMPENSATION APPEALS BOARD I CONCUR, **MARGUERITE SWEENEY** I CONCUR AND DISSENT (See separate concurring and dissenting opinion), Naglane DATED AND FILED AT SAN FRANCISCO, CALIFORNIA OCT 0 7 2014 SERVICE MADE ON THE ABOVE DATE ON THE PERSONS LISTED BELOW AT THEIR ADDRESSES SHOWN ON THE CURRENT OFFICIAL ADDRESS RECORD. **JOSE ZUNIGA** STRAUSSNER SHERMAN VEATCH CARLSON, LLP JFS/abs

ZUNIGA, Jose

CONCURRING AND DISSENTING OPINION OF COMMISSIONER CAPLANE

I concur with the majority that section 4663(e) precludes apportionment of the permanent disability caused by applicant's back and cardiovascular condition between the two injury claims and that the issuance of a single award is appropriate. However, I do not agree that applicant is entitled to two periods of section 4850/temporary disability indemnity benefits.

The WCJ found that both claims involve injury to the low back, and defendant paid temporary disability benefits on the specific injury claim in ADJ8610360 from July 6, 2008 to June 16, 2010. Although the WCJ did not find injury to the knees as part of that claim, Dr. Sampson wrote in his August 20, 2009 report, in which he opined that applicant incurred cumulative industrial injury to both knees, that applicant had bilateral knee pain for approximately two years before that date. Thus, applicant's knee condition contributed to the period of temporary disability paid in in ADJ8610360.

In addition, applicant did not return to work in the month between the end of the first period when temporary disability benefits were paid for the specific injury, and the start of the second period during which temporary disability benefits were paid for the cumulative injury from August 13, 2010 to March 2, 2012. In that the same body parts were involved in both periods of temporary disability, the WCJ should have found that the temporary disability indemnity/section 4850 benefits paid for the specific injury in ADJ8610360 overlap the temporary disability attributed to the cumulative injury in ADJ8610355.

The period of temporary disability for which indemnity is owed runs concurrently in separate injury claims to the extent the periods of temporary disability for the two claims overlap. (Foster v. Workers' Comp. Appeals Bd. (2008) 161 Cal.App.4th 1505 [73 Cal.Comp.Cases 466]; Morris v. Workers' Comp. Appeals Bd. (2009) 79 Cal.Comp.Cases 794 (writ den.).) The employee is entitled to additional indemnity only to the extent that the periods of temporary disability do not overlap. (Ibid.) Here, the temporary disability caused by the two injuries overlapped and defendant should only be liable for one period of temporary disability indemnity/section 4850 benefits.

The issuance of a single combined award of permanent disability for both injury claims further supports the conclusion that there is overlap of the two injury claims for the purpose of awarding

temporary disability benefits. It is anomalous to issue one award of permanent disability for both injury claims because they are inextricably intertwined, while awarding separate periods of temporary disability for each of the injury claims.

I would find that applicant's period of temporary disability ran concurrently for both injury claims.

WORKERS' COMPENSATION APPEALS BOARD



RONNIE CAPLANE, Commissioner

DATED AND FILED AT SAN FRANCISCO, CALIFORNIA

OCT 0 7 2014

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

JOSE ZUNIGA STRAUSSNER SHERMAN VEATCH CARLSON, LLP

JFS/abs

Mycorp