

THE Supreme Court
STATE OF FLORIDA

Shirley Anderson,

Case No. OJCC Case Nos.

Case No. 1D16-5842

13- 024187NPP

Accident date: 06/24/2013

Vs.

APPELLANT,

Woodland Terrace Extended Care LLC/
Woodland Terrace, Inc., and
/Summit, and
Bridgefield Employers Insurance Company,
Employers/Carriers/Serviceing Agents
Volusia County
APPELANTEE. _____ /
Carrier/Serviceing Agent
Summit / Bridgefield Employers Insurance Company

JONES, HURLEY & HAND, P.A.
COUNSEL FOR EMPLOYER/CARRIER

ADAM M GILL Orlando
1040 Woodcock Road Suite 100
Orlando, FL 32803

FILED
JOHN A. TOMASINO
APR 17 2017
CLERK, SUPREME COURT
BY

INITIAL BRIEF WITH APPENDIX JURISDICTION REMEDY STATUE NOTICE OF APPEAL FILED DECEMBER 28, 2016. APPEAL PURSUANT fs PETITION JUDICAL REVIEW FILED JUNE 7, 2016. PETITIONER'S HEARING PETITION FOR REVIEW PREVIOUS DECISIONS of Lower Tribunal Court Final Decision made Final Summary Order AUGUEST 28, 2016 WITHOUT HEARING CASE. ADDITIONALLY7 EVIDENCE BARED ANSWER NO. OJCC 165619 WWA WITHHELD BARRED AS OF 06/24/13 INJURY MRI TEST Torn meniscus right knee and nerve damage related to back and right leg care of a physician for an injury identified under Fla. Stat. s. 440.192(2) (c), (Fla. Stat. s. 440.192(2) (i)). DATE IN THIS MATTER BEFORE ADMINISTRATIVE LAW JUDGE WILBUR W. ANDERSON OMITTED EVIDENCE UNLAWFUL TO FS 112.3187 Terminate INJURED EMPLOYEE WHISTLE BLOWERS PREDICATED. FLORIDA STATUES 440.45(1) (a), (4) FS. 440.15(a), TO NOTICE, FS 440.10(1) (a) Motion DIFFERENT CASE JUNE 15, 2016. SUMMARY JUDGEMENT OF VOLUSIA COUNTY DATE ACTION FOR RELIEF RECONSIDERATION. TIMELY MOTION COMPLIANCE FILED FOR HEARING AS OF COURT ORDER LETTER DATED JANUARY 13, 2014. All state appeals have been exhausted, where an issue of federal constitutional or statutory law is in question. Exceptional and controversial cases, however, the time limit may be extended. During period of Appeal process case was being reviewed in Volusia County for Judge Pitts. Eventual Hearing in Orlando, Florida December 5, 2016. Assigned Recusal Case September 29, 2017. Non-Attorney represented Appeal District Court of Appeal refused to hear case misrepresented case torn Right Knee Meniscus Case DOA 6/24/14 refiled, and again 3/7/16. Insolvency February, 1, 2017 relief in refuse to Order DCA December 28, 2017. January 13, 2017. Afterward Filed by Judge Pitts Office December 13, 2017 response to Notice of Appeal to the First District Court of Appeal December 28, 20126 decision December 29, 2017 Order from the 1st District Court of Appeal, State of Florida Insolvency. Verified Petition for Relief from Paying Filing Fee submitted Relief from Paying Costs. BRIEF OF PETITIONER ON JURISDICTION

Venue shall remain in the Daytona Beach District, Volusia County
Division of Administrative Hearings Office of the Judges of Compensation Claims 1180 Apalachee Parkway,
Suite A Tallahassee, Florida 32301 (850) 487-1911 www.fljcc.org
Evidentiary Motion Hearing was scheduled for Dec 5 2016: 1:30 pm: in Orlando, FL. Therefore, motioned for rehearing should be recognized.

REQUEST PURSUANT FOR COMPENSATION BENEFITS: SEE ATTACHED MEDICAL RECORDS FS 60Q-6.123, F.S. 60Q-6.114, FS 440. 20 (11)1(b), (2). RECLINE RESCOVERY NECESSARY FOR RESTORATION 440.20(11) (b), F.S. 440.28, HEALTH CONDITION AND STATUS CHANGE CONSIDERATION. 440.20(11) (a) or (b), F.S., 60Q-60Q 6.114(5), 60Q-6.118. 60Q-6.123(10), (11) APPEAL SUMMARY FINAL HEARING IS NECESSARY FOR ESSENTIAL MEDICAL CARE. FS 60Q-6.116(11) (12). REGARDING. Pursuant Appellant Procedure 9.315(a) Claimant challenges. 60Q-6.115(4), F.A.C., FS 440.20(11), Summary of Final Judgment: Affidavits, Compensable Act. FS 440.09 relevant medical findings claimant entitlement to workers' compensation benefits Pursuant FS section 440.09(4). Employee Claims medical findings involved Torn Right Knee Meniscus injury knee arose out of work duty performed during employment qualify for compensable care. injury resulting manifestations disability occurred at work.

COURT ORDER IN ERROR ORDER WHICH DENIED MOTION TO HEAR JUNE 06, 2016. COURT DETAILS OMITTED SECONDARY IN JURY OF JUNE TWENTY-FOUR, TWO THOUSAND FOURTEEN, (06/24/13 DATE OF INCIDENT). THEREBY, DATE JUNE 24, 2016 INCIDENT EXISTED PERSPECTIVE NEVER RECOGNITED BY COURT RULINGS. TWO INJURIES AND TWO DATES SEPARATED DATES, NOT SHARED AS PETITION DATED APRIL 31, 2014 UNDER PRO SE THE TERRACE OF DAYTONA BEACH LLC. SUMMARY JUDGMENT MOTIONS EVIDENCE IS PRESENTED OF MRI TEST RESULTS 9/30/13 AND 06/18/16 RIGHT, KNEE ACL, NERVES AND BACK. ISSUES ARE IDENTIFIED AND DEFINED AS FOLLOWS. HEARING HELD BEFORE THE JUDGE TO DETERMINE THE STATUS OF THE CASE NO. CIRCUMSTANCES CONCLUDED OJCC CASE NO.13- 024187NPP judgement classified old injury as in strained ACL and fracture patella are different injury without reviewing evidence at issue in OJCC Case No. 13-024187WWA. AND CASE NO.16-005619NPP OMITTED CONCLUSION POSSIBLITY DEVELOPMENT OF SECOND INJURY DATE RESULTS.

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Case style: Workman Compensation Claim

Shirley Anderson

v.

Woodland Terrace Extended Care/etc. et al.

Case Number: 1D16-5842se number: SC ___ - ___

Lower Tribunal Case(s): 13-024187NPP

Originating court: (circle one)(First) DCA

District Court of Appeal

BRIEF OF PETITIONER ON JURISDICTION

Venue shall remain in the Daytona Beach District, Volusia County

Division of Administrative Hearings Office of the Judges of Compensation Claims 1180 Apalachee Parkway,
Suite A Tallahassee, Florida 32301 (850) 487-1911 www.fljcc.org

If not represented by counsel,

Petitioner's name, address, and phone number:

Shirley Anderson

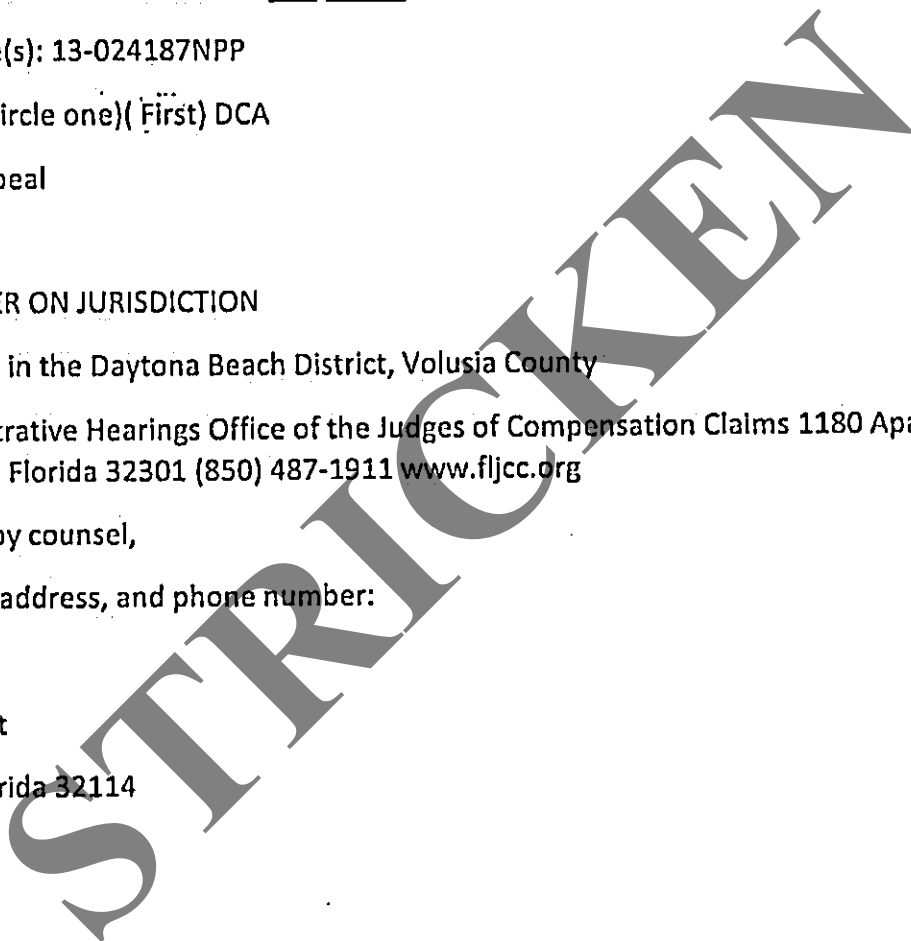
723 Kentucky Street

Daytona Beach, Florida 32114

386-233-5531

Petitioner's signature:

X _____



APPENDIX A

1. United States v. Detroit Timber & Lumber Co., 200 U. S. 321, 337. SUPREME COURT OF THE UNITED STATES OFFICE OF SENATOR MARK DAYTON v. HANSON APPEAL FROM THE UNITED STATES COURT OF APPEALS FOR THE DISTRICT OF COLUMBIA CIRCUIT

No. 06-618. Argued April 24, 2007—Decided May 21, 2007

After his discharge from employment with former Senator Dayton, appellee Hanson sued appellant, the Senator's office (Office), invoking the District Court's jurisdiction under the Congressional Accountability Act of 1995 (Act). The court denied a motion to dismiss based on a claim of immunity under the Constitution's Speech or Debate Clause, and the D. C. Circuit affirmed. The Office then sought to appeal under §412 of the Act, which authorizes review in this Court of "any . . . judgment . . . upon the constitutionality of any provision" of the Act. Held: This Court lacks jurisdiction under §412 because neither the dismissal denial nor the D. C. Circuit's affirmance can fairly be characterized as a ruling "upon the constitutionality" of any Act provision. The District Court's order does not state any grounds for decision, so it cannot be characterized as a constitutional holding. Moreover, neither the Court of Appeals' rejection of the Office's argument that forcing the Senator to defend against Hanson's allegations would necessarily contravene the Speech or Debate Clause, nor that court's leaving open the possibility that the Clause may limit the proceedings' scope in some respects, qualifies as a ruling on the Act's validity. The Office's argument that the appeals court's holding amounts to a ruling that the Act is constitutional "as applied" cannot be reconciled with §413's declaration that the Act's authorization to sue "shall not constitute a waiver of . . . the privileges of any Senator . . . under [the Clause.]" Nor do any special circumstances justify exercise of this Court's discretionary certiorari jurisdiction, the D. C. Circuit having abandoned an earlier decision that conflicted with another Circuit on the Clause's application to suits challenging a congressional Member personnel decisions. Pp. 2-44. _____

See Corcoran v. Foster Auto GMC, Inc., 746 S.W.2d 452, 456 (Tenn. 1988). FACTS The defendant was fifty years of age at the time of this trial. He is a high school graduate and he attended two years of college studying automotive technology. He testified at trial that he began working for the plaintiff's company, Dixie Wire, as a utility operator in 1993. As a utility operator, the defendant testified that his duties included some repetitious work with his hands and arms. In 1997, the defendant began working as a PVC extruder operator for Dixie Wire. He testified that his duties in this position involved quite a bit more use of his hands, wrists, and arms. Outside of his

employment at Dixie Wire, the defendant also laid carpet for supplemental income. He testified that from 1993 to when he performed his last carpet job in 1999, he performed a total of 38 carpet jobs, averaging about six hours of carpet work per month. He testified that he never had any problems with his wrists or hands while performing carpet work. In 1997, while working as a PVC extrude operator, the defendant began to notice numbness and tingling in his hands and wrists. He went to see Dr. Darrell G. Arnett but was not treated for the numbness and tingling at that time. The defendant began to notice numbness and tingling in his hands and wrists. He went to see Dr. Darrell G. Arnett but was not treated for the numbness and tingling at that time. The defendant testified that his hand and wrist problems abated for some time after that. In 1998, while still working as a PVC extruder operator for Dixie Wire, the defendant's problems with his hands going numb reappeared and worsened. He saw Dr. Arnett again on January 22, 1999, and Dr. Arnett diagnosed the defendant with bilateral carpal tunnel syndrome.

The defendant then saw Dr. Thomas E. Tompkins on June 29, 1999. Dr. Tompkins concurred with the diagnosis of bilateral carpal tunnel syndrome and recommended the defendant have surgery. The defendant was at first reluctant to have surgery, but after more problems at work with his hands going numb he decided to have the surgery, after which he returned to work. MEDICAL EVIDENCE The medical evidence for the purposes of the issues raised in this trial was presented by the depositions of Dr. Darrell E. Arnett and Dr. Thomas E. Tompkins. Dr. Arnett, an internal medicine specialist in Nashville, testified that he first saw the defendant on August 14, 1997. At that time, the defendant complained of weakness and paresthesias.¹ Dr. Arnett testified that the defendant next visited him on January 22, 1999, at which time the defendant complained of his hands going numb 15 to 2 times daily. At that time, Dr. Arnett testified, he diagnosed the defendant with bilateral carpal tunnel syndrome. Dr. Arnett did not form any opinion as to causation at that time, but later at deposition, when given the defendant's full history, Dr. Arnett testified that it was his opinion that the defendant's work at Dixie Wire was ¹Paresthesias is numbness and tingling of the arms and legs. -2-

Authoring Judge:

Byers, Sr.J.

Originating Judge:

Carol Mccoy, Chancellor

Date Filed:

Thursday, September 5, 2002

The employee, Jim Parks, age 46, worked as a police officer with the City of Brownsville, Tennessee. Parks had sustained three compensable injuries to his back, but returned to work after each injury. These workers' compensation awards totaled 135 percent to the body. In May of 1993, Parks injured his back for a fourth time while placing a prisoner in the back seat of a patrol car. An orthopedic surgeon, Dr. Robert Jones, testified that Parks' total medical impairment for all his back injuries was 15 percent. Of this total medical impairment, 2 percent was attributable to the May 1993 injury. Appellate review in a workers' compensation case is de novo upon the record with a presumption that the findings of the trial court are correct. Tenn.Code Ann. § 50-6-225(e)(2)(1991 & Supp.1997). Where a question of law is presented, as in this case, appellate review is de novo without a presumption of correctness. *Presley v. Bennett*, 860 S.W.2d 857, 858 (Tenn.1993). review by observing that an employee's prior disabling condition does not prevent a workers' compensation award where a work-related injury aggravates the pre-existing condition. *White v. Werthan Indus.*, 824 S.W.2d 158, 159 (Tenn.1992).

Instead, an employer essentially assumes the risk that an employee may have a weakened condition that is aggravated by a work injury which might not affect a person without the pre-existing condition. *Fink v. Caudle*, 856 S.W.2d 952, 958 (Tenn.1993). The question of whether a prior workers' compensation award for permanent disability to the body as a whole is considered in determining the amount of compensation for a later work injury is addressed by a specific section of the workers' compensation statute, Tenn.Code Ann. § 50-6-207(3)(F). It specifically provides that where
After finding that Parks had returned to work at the same or higher wage, the trial court applied the statutory multiplier of 2.5 to the total medical impairment rating of 15 percent, and awarded 37.5 percent permanent partial disability to the body. Tenn.Code Ann. § 50-6-241(a)(1) (Supp.1997).

The Special Workers' Compensation Appeals Panel affirmed.

The Second Injury Fund filed a motion to review the decision of the Panel, arguing that the Panel erred in applying the statutory multiplier to the employee's medical impairment rating for all his work injuries rather than just his medical impairment rating for the most recent work injury. an employee has previously sustained an injury compensable under this section for which a court of competent jurisdiction has awarded benefits based on percentage of disability to the body and suffers a subsequent injury not enumerated above, the injured employee shall be paid compensation for the period of temporary total disability and only for the degree of permanent disability that results from the subsequent injury.

Conclusion: "For all injuries arising on or after August 1, 1992, in cases where an injured employee is eligible to receive any permanent partial disability benefits, pursuant to § 50-6-207(3)(A)(i) and (F), and the pre-injury employer returns the employee to employment at a wage equal to or greater than the wage the employee was receiving at the time of injury, the maximum permanent partial disability award that the employee may receive is two and one-half (2 1/2) times the medical impairment rating." Tenn.Code Ann. § 50-6-241(a)(1)(Supp.1997).

Tenn.Code Ann. § 50-6-207(3)(F) (Supp.1997) (emphasis added).

An employee who has received compensation for prior injuries based on a percentage of disability to the body and is later injured shall be paid "only for the degree of permanent disability that results from the subsequent injury." Tenn.Code Ann. § 50-6-207(3)(F) (1991 & Supp.1997). Accordingly, under the statutory formula, compensation is not based on the statutory multiplier times the total medical impairment rating, but rather, the statutory multiplier times the medical impairment rating for the later injury. As the Second Injury Fund observes, the limitation in the statute merely prevents an injured employee from receiving dual compensation for the same work-related injury. Special Workers' Compensation Panel erred in this case by applying the statutory multiplier of 2.5 to Parks' total medical impairment of 15 percent. In view of the plain statutory language of Tenn.Code Ann. § 50-6-207(3)(F), the appropriate compensation for Parks' injury must be based on the medical impairment rating for his most recent injury, i.e., 2 percent. Thus, after application of the statutory multiplier, the award is 5 percent permanent partial disability to the body.

CONCLUSION:

Special Workers' Compensation Appeals Panel erred in determining Parks' workers' compensation award based on his total medical impairment rating of 15 percent. Because of Parks' prior compensated work-related injuries, he was entitled to compensation only for the degree of permanent disability resulting from his most recent injury pursuant to Tenn.Code Ann. § 50-6-207(3)(F). We therefore modify the judgment to reflect an award of 5 percent permanent partial disability to the body. Costs of the appeal are taxed to the plaintiff/appellee, Jim Parks, for which execution shall issue if necessary.

FOOTNOTES

1. "For all injuries arising on or after August 1, 1992, in cases where an injured employee is eligible to receive any permanent partial disability benefits, pursuant to § 50-6-207(3)(A)(i) and (F), and the pre-injury employer returns the employee to employment at a wage equal to or greater than the wage the employee was receiving at the time of injury, the maximum permanent partial disability award that the employee may receive is two and one-half (2 1/2) times the medical impairment rating." Tenn.Code Ann. § 50-6-241(a)(1)(Supp.1997).

Oral Arguments: The Carrier received all Petitions for Benefits processed, employee exchanged, exhausted all grievance procedures. The Attorney improperly represented Employer benefits, employer represented Employer which impacted definition Ordered Judgement 8/28/16... Therefore, prejudiced case and conclusion unfair. Judgement omitted case and MRI test Reports of September 30, 2013 strained ACL and Fracture right knee patella.

Furthermore, omitted June 2016 MRI test results Torn right knee meniscus, tests and previous Assessment recommendation of physician surgery for proper healing. Other key Observations, recommendation and other physician reports neuropathy nerve damage in back and leg process. Process of information and evidence for consideration submitted 6/15/16 records filed. Unrepresented by counsel Appealed motion for Eventual Hearing. and case of Second injury 6/24 /13 medical evidence diagnostic testing Reports, tests nerve conduction test Assessment and MRI Observation reports. Statue 440.151 (1) (c), Compensation for disability motor disturbances. Major contributing factors to be recognized Torn Right Knee meniscus.

Furthermore, June 2016 MRI test results Torn right knee meniscus, tests and previous Assessment recommendation of physician surgery for proper healing. Other Observations reports neuropathy nerve damage in back and leg process. Process of information and evidence for consideration submitted 6/15/16.

Honorable Judge Anderson decisions omitted date of injury 6/24/13. to Deny Motion in Rehearing my case for correction of benefits, Job Title and Rearrange of benefits from settlement Rehearing. I am asking First District Court of Appeal to review my case and review decision(s) for correction of Itemized payout of Benefits to be corrected per Salary and Rule for Disabled Individuals.

ADDITIONAL DETAAILS AND FACTUAL EXHABITS ASSERTED AS EVIDENCE. VALIDATED EXTENSIVE NESS OF INJURY LACT OF ACTIVE INSURANCE. EMPLOYER ATTORNEY, CARRIER/ SERVICING AGENTS REJECTED ENTIRE CARE OF INJURY. EMPLOYER ATTORNEY DENIEDE PETITION FOR WORK COMPENSATION AND PROCESS ACT DENIED DUE PROCESS CONSIDERATION. PURSUANT F.S. 440.134 (B), (D). DOCTOR'S RECOMMENDATIONS OF SUPPORTING EVIDENCE SURGERY. REPORT, COPIES FURNISHED TEST RESULTS OF MRI COPIES FURNISHED OJCC PETITION FOR RELIEF FOR RELIEF FROM BRIDGEFIELD EMPLOYERS INSURANCE COMPANY AND GIVEN AND DOCTORS RECOMMENDATIONS FOR TREATMENT(a).

JULY 29, 2016 SUMMIT - CONSULTING INC. RESPONSE TO PETITION FILED 06/07/16 USED THE WORD FRIVOLOUS A good faith effort was not made as required by F.S. 440.192 (4) QUOTED AS LAW IN MEDICAL DETAIL RELATED TO CLAIMANT WITH LEGAL RESENTATION BY COUNCIL. MEDICAL BENEFITS. THIS LAW PERTAINS TO CLAIMT IMPACT JOINT PETITION OF MARCH 31, 2014 PURSANT FS 440.20 11(1) (A) \$1.72 WEEKLY ENTITLED COMPENSATION FOR BOTH DATES OF INJURIES 06/04/13 AND 06/24/16. CLAIMANT FILED CARE JUNE 07, 2016, 06/ 24/13 MRI EVIDENCE DOCUMENTATION AND DETAILS EXISBITS DETAILS, FACTS PROVIDED TO THE COURT IN DETAIL. EMPLOYER FAILED TO SUBMIT PROOF OF the Florida Legislature amended the settlement provisions of F.S. 440.20(11) intent the requirements of Florida approval of contingent on both party's approvals. Agreement is contingent on satisfaction precedent condition liability execute the proposed agreement. The Judge of Compensation Claims noted that one "contingency" Allowed withdraw of Attorney, Judgment process without consideration of Specific listing of all medical care, the name and address of the medical provider and the specific dates of treatment (Fla. Stat. s. 440.192(2) (h)). (b). Specific listing of all medical name and address of the medical provider, the amounts due, and the specific dates of treatment due (Fla. Stat. s. 440.192(2) (c)), (2)(f). Petition for Benefits violates the provisions set forth in Florida Statute 440.192(3) and 59A-23.006 Grievance Procedures. Accident date: 06/24/2013. Requested the initial indemnity per start date as filed, disability, average weekly wage and compensation rate never paid in response to Benefits) as received by the carrier, the completed written grievances were filed.

FS Compensation for disability resulting from injuries which occur after December 31, 1974, shall not be less than \$20 per week), otherwise, Equal to 100 percent of the statewide average weekly wage. (Increase to 100 percent from 66 2/3 percent of the statewide average weekly wage shall apply as Compensation Law). Many decertifies throughout Affidavit OJCC Case No. 16-005619WVA. SUMMARY FINAL ORDER not reviewed properly in court by Judge Wilbur W. Anderson. Unrepresented by counsel, Employer Attorney fraudulently and misrepresents settlement case on March 31, 2014. extensive medical care required to recovery and surgery, therapy and other medications not covered supported by secondary insurance Medicare care... injury omitted by employer neglected failed to confirmed injury by denying claim and petitions. Employer omitted level of medical process by connection physical examination findings or diagnostic Testing Florida Legislature coming into focus. amended the settlement provisions of F.S. 440.20(11) THE Disagreement was contingent based claim entirely on 3/31/2014 Disputed Final Decisions of Summary Judgment: 08/28/16 Disputed Facts. Judgment Motions Opinion Asserred Failure review second case and to verify factual evidence and ruled pertaining to evidence. pursuant Rule 9.430 and Section 57.081(1).

Assertions made reviewed by opposition to motion for final summary judgment. Circumstantial with affidavits this case decided prior Court's Ruling based assertions made by, conclusion Refudgment d notions. Court Opinion Denied Motion for Re-Hearing Case 04/14/14, PURSUANT F.S. 440.134 (b), (d). JULY 29, 2016 SUMMIT- CONSULTING INC DOCUMENTED RESPONSE INFLUENCED COURT DECISIONS. SUMMIT CARRIER RESPONSE TO PETITION FILED 06/07/16.

RECENT SUMMARY JUDGMENT DECISIONS CONCERNING COMPENSABLE INJURY FAILED TO ADDRESS ACQUIRED WORK RELATED INJURY AND RETAINED AT WORK. EMPLOYER AT WOODLAND TERRACE EXTENDED CARE, LLC AT THE TIME OF INJURY. THE JOB-RELATED INJURY ACQUIRED DURING WORK PERFORMANCE. INJURY TRAUMA ACQUIRED TWO DATES D/O/A 06/04/13 AND 06/24/13 INJURIES: NOTICE MOTION OF APPEAL PETITIONER'S 13-024187WVA. FS section 440.20(11) (b), REQUIRE PHYSICIAN SPEACILIST PERSPECTIVE FOR EXAMINATION RATING FACTS TO APPLY MMI AND TEST RATINGS. OJCC FAILED TO ADDRESS 06/24/13 RELATED INJURY CASE. AND TO REESTABLISH WAGE, MEDICAL COMPENSATE FOR DISABILITY. SUMMIT CARRIER PREJUDICED PETITION BY USING UNAUTHORIZED STATEMENT RECORDED ON PETITION RESPONSE. THEREFORE, LABELING CASE DETAILS AS FRIVOLOUS INDICATED AS A MATTER OF LAW POSTED ON PETITION FOR BENEFITS, PREMISE OF WHICH EMPLOYER DENIED BENEFITS). FS 440.20 (A) DENIED INDEMNITY AND ME OMITTED MEDICAL CARE, PAST, PRESENT, AND FUTURE" PETITION FOR BENEFITS AND DUE PROCESS CONSIDERATION 4/16/2014 Order Denying Motion for Rehearing or to set aside fraud judgement Named Woodland Terrace.

Fraud, illegal judgement under Settlement of Divest Liability which paid \$1.72 per week for lifetime 1456 weeks over expected lifetime chapter 42. - PURSUANT FS. 440.134(B), (D). JULY 29, 2016 SUMMIT - CONSULTING INC. RESPONSE TO PETITION FILED 06/07/16 INGAEGED USED THE WORD FRIVOLOUS IN RESPONSE FOR MEDICAL BENEFITS. FINAL SUMMARY ORDERS IN CASE AND JUDGMENT RESPONSE PREJUDICED STANDARDS SET BY WORKMAN COMPENSATION WHICH IMPACTED ALL PETITIONS FILED THERE AFTER, INCLUDING JOINT PETITION STIPULATION NAMING THE TERRACE OF DAYTONA BEACH FLORIDA AS EMPLOYER. DATED MARCH 31, 2014 PURSUANT FS 440.20 11(1) (A) DISAPPROVED BELOW PERDICT \$1.72 WEEKLY AS ENTITLEMENT COMPENSATION FOR BOTH INJURIES 06/04/13 AND DATE: 06/24/

INJURY DATE OMITTED AS APRIL 30, 2014. JUDGE ANDERSON DENIED MOTION TO HEAR CASE. JUDGEMENT CONCLUDED SECOND INJURY AS FIRST IN SUMMARY OF FINAL ORDER RULED 8/28/16 FINAL HEARING ORDER. ATTORNEY BENEZETTE FILED CASE UNDER NAME FAIR HAVEN 3/8/16 PRIOR TO HIS WITHDRAWAL WITHOUT ORDER.) Phone conference scheduled for Apr 30 2014: 11:15 ore: Daytona Beach, FL. Compensability qualified for care, require Authorization of Orthopedic care for evaluation and treatment necessary for the fractured patella, strained ACL as per MRI. Judge: Wilbur W. Anderson 4/30/2014.

RECENT COURT DECISIONS JURGEMENT ENTERED ON PRECONCEIVED NOTIONS. OMITTED DETAILS AND FACTS OF EVIDENCES EXHABITED OUT COME OF SECONDARY INJURY SUBSTAINED DATE 06/24/13 HAVE CURRENT UNRESOLVED ISSUES. JUDGEMENT IMPOSED AS DATE D/O/A JUNE FOURTH TWO THOUSAND THIRTEEN. FUTUREMORE, COURT RECOGNIZING MARCH 31, 2014 SETTLEMENT AGAINST THE TERRACE OF DAYTONA BEACH MEDIATION DATES 06/04.13 D/O/A. COURT FAILED TO RECOGNIZE IN ERROR TO BARR BY PRIOR JUDGEMENT CAPACITY. RECENT COURT DECISIONS JURGEMENT ENTERED ON PRECONCEIVED NOTIONS. OMITTED DETAILS AND FACTS OF EVIDENCES EXHABITED OUT COME OF SECONDARY INJURY SUBSTAINED DATE 06/24/13 HAVE CURRENT UNRESOLVED ISSUES. JUDGEMENT IMPOSED AS DATE D/O/A JUNE FOURTH TWO THOUSAND THIRTEEN. FUTUREMORE, COURT RECOGNIZING MARCH 31, 2014 SETTLEMENT AGAINST THE TERRACE OF DAYTONA BEACH MEDIATION DATES 06/04.13 D/O/A. COURT FAILED TO RECOGNIZE IN ERROR TO BARR BY PRIOR JUDGEMENT CAPACITY.

ENTITY IDENTITY PRO SE LISTED THE TERRACE OF DAYTONA BEACH LLC AS THE PLACE OF EMPLOYMENT AT THE TIME OF INJURY. IN FACT, WOODLAND TERRACE WAS PLACE INJURY WAS SUBSTAINED INJURY. MRI TEST RESULTS, RELATED DETAILS AS DATE OF INJURY. DETAILED DESCRIPTION OF THE ACCIDENT: MMI HAD NOT BEEN REACHED. UNABLE TO PERFORM REGULAR ACTIVITIES DUE TO REPETITIVE TRAUMA FROM EXCESSIVE KNEELING RIGHT KNEE BODY PART INJURED THAT NIGHT AT WORK: PETITION FOR MEDICAL BENEFITS COMPLETED, CHARACTER OF DISABILITY RIGHT KNEE INJURY, RIGHT LEG TORN MANESCUS TEAR, AND RIGHT ACL AND BENDING THAT NIGHT AT WORK.

EMPLOYER CARRIER RESPONSE DELAYED PETITION TO SET ASIDE AND DENY FACTS RELATED WORKERS COMPENSATION PETITION DATED 06/24/13 FILED IN COURT. RESPONSE IN DETAIL 03/07/16 OPINIONS IN DETAILS PREJUDICED ALL UNRESOLVED ISSUES. MMI NEVER REACHED AND IMPAIRMENT INCOME NEVER GIVEN. NOTE: THIS CASE JUDGED BY CARRIER LABEL REQUEST DESCRIBED PETITION AS FRIVOLOUS good faith effort was not made as required by grievance procedure.

REFERENCE F.S. 440.192 (4) HOWEVER THIS LAW DOES NOT APPLY TO UNREPRESENTED CLAIMANT RATHER PROSPECTIVE A good faith effort required AS LAW F.S. 440.192 (3), s (6). INFLUENCED ANYONE WHO ACCESSED CLAIM. SHARED OPINION AS LAW BEFORE suggesting that OJCC DID NOT HAVE JURISDICTION OVER CLAIM. THEREFORE, CASE TREATED AND DECIDED BY COURT'S ADOPTION OF A RULE WRITTEN IN GRIEVANCE FOR CONCLUSION IN GRIEVANCE PRECEDURE AHCA form number 3160-0019 PRECEDURE NOT FOLLOWED AS INDICATED. Case has been in Denial by employer Misconceptions of Petition by the courts. RESPONSE TO PETITION FOR BENEFIT DATED 03/07/16 AND RECEIVED 03/07/16: First injury strained ACL and fractured patella are different from Second injury clearly different injury. Second case injury Torn Meniscus of right knee different injury with and including nerve damage in back and leg. Response to the Plaintiff's Petition claim case OJCC 13-024187 WVA for Consideration 3/7/2016 Petition for Benefits filed injury at issue in OJCC Case as same issue

Strained ACL and Fracture Right Knee Patella Employer's Insurance Company, Employer/ Carrier/ Servicing, Agent (injury at) OJCC Case No. 16-005619WWA.

Smith v. Liberty Mutual Fire Ins. Co. [10/31/02] 2002 MTWCC 54. The opposing party did not support medical Liability or contentions relating to Affidavits or sworn evidence raising issues or matter of fact, where summary judgment motion raised recommendation and pronounced medical issues. And genuine issues and a matter of fact are raised medical evidence, test, and medical testimony raised issues revealed. Medical attention scheduled to take place. Opposing Council Motioned for summary judgment, introduced for Decision beforehand. Scheduled Prior to Appointment ruling considered. The Court then interpreted deferred Ruling staged based on the Motion of summary judgment Ruled. Judgement Decision focused on process rather than being prompt by submitted evidence, or Testimony. Consideration, Theory, the medical testimony was never heard per strategy. Court in determining whether the Motion for summary judgment denied the Opportunity of witness for failure insurance to comply pointed out for failure to comply with ARM 24.5.329(3) Rules. Particularly, Standards due process regarding presentation of alleged undisputed facts. The leading Motion for summary judgment Denied, Insurance failure to comply with ARM 24.5.329(3) regarding facts pointed out at presentation of alleged undisputed facts. Met the requirements process set forth facts and details which denied resources. Specific evidence related evidence reduced facts to resolve case. Necessary related information to resolve case a motion for summary judgment and avoids the possibility that the court would miss essential facts...

The Employer/ Carrier/ Servicing Agent refused to release Workers Compensation benefits. Immediately consideration required but the Employer refused to supply Emergency care within seven days' limit as needed to present. Instead Petition Denied entire claim. Entire claim has been denied as Carrier to paying established an Average Weekly Wage of \$570.00 sufficient to settle a workers' compensation claim with a corresponding Compensation Rate of \$380.00. Dated filed Petitions 6/4/2013, 6/24/13, 4/14/2014, 4/30/2014, 5/2/14 03/ 07/ 16 and 3/8/2016. Compensation Rate of \$380.00 weekly Response to Requested Benefits. Employer s rescinded Petition for Benefits. Employer denied all medical care, past, indemnity and present, and future". ATTORNEY JASON ROBINS FILED OCTOBER 17, 2013 WITHDREW PRIOR TO MEDIATION. ATTORNEY BENEZETTE FILED SECONDARY WORK RELATED INJURY AND MEDICAL FACTS UNDER FAIR HAVEN AND WITHDREW WITHOUT ORDER PRIOR TO MEDIATION MAY 25, 2016. FUTHERMORE, FS. 60Q-6.123 CLAIMANT APPEAL DECISION PRO SE FILED UNDER THE TERRACE EXTENDED CARE LLC. CLAIMANT RULED ORDER PRO SE UNDER NAME WOODLAND TERRACE EXTENDED CARE CENTER. Employer Attorney wasn't present at Mediation 8/17/16 Mediator documented Impasse.

Cited: [read:http://wcc.dli.mt.gov/tools/ARM_24_5_329.htm](http://wcc.dli.mt.gov/tools/ARM_24_5_329.htm)

Final Summary Order 8/28/2016, - 9/28/2016. Order Woodland Terrace Extended care rescinded decisions to start date, disability type, average weekly wage and compensation, the initial indemnity process set forth by worker for compensation benefits available under Chapter 440 of the Florida Workers Compensation Act. Prejudiced by responses statements related to issues of Petition. Employee limited resources predicated on developing repression, misuse of the system Chapter 42 Liability.

Discretionary review required Summary final order perjury and illegally obtained faulty judgement did not recognize and include date of incident which occurred date 06/24/13. Limited Judgement focused on DOA 06/04/13 which specifically Named the Terrace of Daytona Beach 1704 Huntington Village Cir. Llc. Daytona Beach, Florida 32114. Judgement Name Woodland Terrace Extended care of Deland, Florida 32720. Llc. Deland BEACH, FL 32114. Address 120 Chipola Avenue, Deland, Florida clerical error.

Judgement failed to Address Accident date: 06/04/13, Woodland Terrace Petition filed 03/07/16 OJCC Case No.: 16-005619WWA. Employer Denied Claim 06/24/13 on 3/31/2014. Entire claim is denied stating (This Petition for Benefits violates the provisions set forth in Florida Statute 440.192(3) and 59A-23.006 Grievance Procedures). Carrier received the completed written grievance as required.

Respondent Petitioner's Accident date: different case filled with corrupt judgements 6/24/2013 submitted evidence. Employee Petition MRI test evidence, document as Proof submitted to Employer MRI Test results of MRI test results Show proof as Evidence. WC Insurance claim made no attempts to resolve medical standards and provide comprehensive resources in pending claim of Injury dates 6/24/2013 processed for benefits. Summit Employers Insurance failed to meet requirements as Company, Employer/ Carrier/ Servicing Agent in default standards of Law. Ripe Claim BENEFITS lack MMI levels. Case has been in Denial by employer Misconceptions of Petition by the courts.

Sustained second injury, relating resulting Neglect of Petition for injuries filed to deny Benefits for future claims for benefits which occur after rejection of released information filed. Pain and Suffering as result of presented a conclusion presumed claim as frivolous by the Employer insurance response to request to Benefits. Response to the entire Plaintiff's Petitions claims case for Consideration 3/7/2016 Petition for Benefits filed. Fringe benefits are due for the 13 weeks prior to the date of accident to back from DOA to present pending. Bridgefield Employers Insurance Company, Chapter 42 EMPLOYERS/ Carrier/ Servicing Agent. Denied claim as Entire claim has been denied as Carrier determined established an Average Weekly Wage of \$570.00 sufficient to settle as workers' compensation claim with a Compensation Rate of \$380.00 weekly. Average Weekly (Compensation Rate Temporary Partial Disability from Judge: Wilbur W. Anderson (6/04/13, 6/24/13 to the present and continuing) into future. Carrier/ Servicing Agent considered good faith to pay \$1.72 weekly wage page five of stipulation Said Settlement was settled against The Terrace of Daytona Beach, LLC, and previous Judgement were in error listing the name as Woodland Terrace Extended Care.

Therefore, Employer Denial Petition for Benefits violates the provisions set forth in Florida Statute 440.192(3) and 59A-23.006 Grievance Procedures. The Carrier received all Petitions for Benefits processed, employee exchanged, exhausted all grievance procedures. The Attorney improperly represented name of Employer which impacted definition Ordered Judgement... Therefore, fair conclusion JUDGEMENTS REQUIRE reward of needed

benefits. The Carrier received Petitions for Benefits Claimant grievance procedures followed procedures all exhausted. Furthermore, use of said, improper use Judgements.

of other (name subsidiary company) components identified in Judgement within Order 13-024187WWA Accident date: Orders listed as OJCC Case No. 13-024187WWA: (06/04/13). 06/04/2013 MRI Test Right Knee Fracture Patella and Strained ACL ligament injury results. (06/24/13) Hard evidence test results revealed 16005619WWA right knee torn meniscus of right knee identified. Judgement Court Order entered under Employer Name Woodland Terrace Extended Care Judgement Woodland Terrace Extended Care/Name on Title Page Heading. Adverse Judgement named under Woodland Terrace Extended Care/Woodland Terrace, Inc. 120 W. Chipola Avenue Deland, FL 32720. Details perjury under Stipulation Pro Se Affidavit and Final Hearing another Name listed appeared, perspectives subsidiary company named as The Terrace of Daytona Beach LLC, 1704 Huntington Village Cir. Daytona Beach, Florida 32114.

The Claimant not represented by counsel, filed Petition for Benefits 06/07/16 Attorney John Benezette withdraw prior to Mediation and Eventual Hearings. Employer Attorney Adam M. Gill fraudulently misrepresented both OJCC Cases. Absent of authorized Medical Benefits evident or released response occurred either 16-005619WWA, 13-024187WWA to date suggested case's March 31, 2014 Denied authorized medical care necessary. Employer insurance carrier answer and failed claim process too appropriately to authorize follow-up care, treatment. Petition issues filed for Appropriate Medical issues consideration... Historically, injured worker's compensation claim under F. S. 440.20(11), receive the necessary help needed for recovery. Case lengthy process, pain and suffering and caused hardship. Final Summary Order developed case Judgment without consideration of Supporting Evidence, facts. Doctor's Surgery proper recommendations of surgery, post MRI test results. Reports, Copies furnished for Administration approval of the Judge of Compensation Claims to be viewed, changed lack of recourse to Compensation in the best interest of the injured worker.:

Furthermore, Florida Administrative Code Rule 60Q-6.101 Rule provides that a judge may enter a summary final order to approve Workman Compensation. Benefits rescinded by Judge Wilbur W. Anderson's ripe average weekly wage" average weekly wage paid by employers under Florida indemnity, disability type, average weekly wage and Compensation start date required of Denied Petition(s) recovery. Compensation as of 06/04/13 injury, as rate applicable for care pending for release job related injury. While engaging work activity related circumstances related to Nurse Job of administering medications, acquired injury by suddenly being attacked by a combative, belligerent Alzheimer patient on a low floor bed. MRI test of 9/30/13 revealed fractured right knee patella and strained ACL tendon. Second MRI revealed Traumatize second injury related date 06/24/16 Torn Right Knee Patella circumstances required two response and communication from Judgements from the OJCC.

ATTORNEY JOHN BENEZETTE FILED CASE UNDER SAME OWNER NAME FAIR HAVEN DATE OF 3/8/07. ATTORNEY WITHDREW PRIOR TO MEDIATION WITHOUT ORDER REQUEST AND PRIOR TO SUMMARY JUDGMENT. COURT DISREGARDED EVIDENCE AND PETITIONS FOR BENEFITS REQUEST. WOODLAND TERRACE EXTENDED CARE JOB RELATED INJURIES SUPPORTED BY DETAILS EVIDENCE OF STRAINED ACL LEGAMENT AND FRACTURED PATELLA OF RIGHT KNEE SEPTEMBER 30, 2013. MRI JUNE 2016 REVEALED TORN MENSICUS UNDERLYING TEAR AND ACUTE NERVE DAMAGE AND PAIN RELATED RIGHT LEG AND LOW BACK. DISCOVERY MORE SEVERELY INJURED THEN FIRST REPORTED.

INJURY VERIFIED BY EVIDENCE OF MRI TEST. Response to the Plaintiff's Petition claim case OJCC 13-024187 for DATES 06/04/13, OR 06/24/13 Consideration 3/7/2016 Petition for Benefits filed. Bridgefield Employers Insurance Company, Employer/ Carrier/ Servicing Agent. Employer did not supply Emergency care with seven days as needed. Denied claim as Entire claim has been denied as Carrier has established an Average Weekly Wage of \$570.00 sufficient to settle a workers' compensation claim with a corresponding Compensation Rate of \$380.00. 6/24/13, 4/14/2014, 4/30/2014, 5/2/14 and 3/18/2016.

Entire claim was denied Petition for Benefits violates the provisions set forth in Florida Statute 440.192(3) and 59A-23.006 Grievance Procedures). Carrier received the completed written grievance. Respondent Petitioner's Accident date: Two Actions required, different case filed one corrupt judgements 6/24/2013 MRI test evidence, document as Proof submitter to Employer Test results of MRI test results Daytona Beach, FL 32114

Certificate of Service:

I certify that a copy hereof has been furnished to (opposing counsel names and addresses) by (delivery/mail/email) on (date). _____ (signature)

COUNSEL FOR EMPLOYER/CARRIER

Insurance Company

**JONES, HURLEY & HAND, P.A.
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Daytona Beach, FL 32114 (SIGNATURE) _____