

RESOLUTION NO.: 54-23

**CAMDEN COUNTY INSURANCE FUND COMMISSION
AUTHORIZING WORKERS COMPENSATION SETTLEMENT WITH
JEFFREY ELLIS**

WHEREAS Jeffrey Ellis has filed a claim against the Camden County Insurance Fund Commission with the State of New Jersey, Department of Labor, Division of Workers' Compensation; and

WHEREAS the parties have recommended a resolution for 22.5% of partial total in the amount of \$36,630.00, plus costs of \$4,395.60, and a Section 20 in the amount of \$5,000.00 for the thoracic spine for a total settlement in the amount of \$46,025.60; and

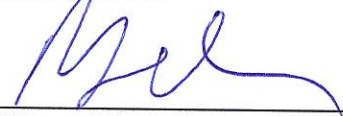
WHEREAS the claim so filed has been resolved, now, therefore,

BE IT RESOLVED, by the Camden County Insurance Fund Commission that disposition of the claim filed by the above-referenced individual is authorized as follows:

<u>CLAIMANT</u>	<u>PETITION NO.</u>	<u>AMOUNT OF AWARD</u>
Jeffrey Ellis	CP2021-509	\$36,630.00 (22.5% of partial total)
		\$4,395.60 (costs)
		\$5,000.00 (Section 20)

BE IT FURTHER RESOLVED that the proper Commission officials and/or their agents, be and are hereby authorized to execute such documents as shall be necessary to affect the disposition set forth above.

ADOPTED: 9-27-23

BY: 

CHAIRPERSON

ATTEST: 

VICE-CHAIRPERSON

Camden County Insurance Commission Payment Authority Request

SAR

Claimant: JEFFREY ELLIS	Status as of: 8/9/2023
Date of Birth: 01/09/1962	Claim Type: Indemnity
Date of Hire: None Listed	Date/Time of Loss: 10/17/2019
CSI File Number: 630-119-0002412	Location: Camden County
CSI Handling Adjuster: Monica Coleman	Department: Youth Center
CSI Adjuster Phone: 856-380-6544	Litigation: Yes-CP: 2021-509
Excess Carrier: NJCEL	Defense Attorney: PIETRAS SARACINO SMITH & MEEKS LLP
Excess Notice Date: N/A-	Claimant/Plaintiff Attorney: MICHAEL R CONTARINO
Excess Handling Adjuster:	Claimant/Plaintiff Attorney Firm:
Excess Adjuster Phone:	Claimant/Plaintiff Attorney Phone:
Member Entity SIR: 300K	Policy Type: Workers' Compensation
CIB: No priors	CEL-JIF Companion File#:
Subrogation: No	Medicare Beneficiary: No
Aww: \$1,443.20 Comp Rate: \$921.00	Work Status: Retired on 5/1/20

Summary of the Incident Facts:

Injured Worker was in a classroom when two residents started to fight. IW was trying to restrain one of the residents when he injured his back and neck/head.

On the same day of injury IW was seen at WorkNet and was diagnosed with a cervical strain/sprain and thoracic strain/sprain. An x-ray of his back was taken in the office and revealed arthritic changes but no fracture or dislocation. At the 10/22/19 follow up, Dr. Introcaso recommended a CT scan of his head and neck, medication, and physical therapy. The Dr. also released him to RTW, with restrictions. The employer was able to accommodate his restrictions. The CT scan was completed on 11/08/2019 and showed no acute hemorrhage or masses. There was a cystic lesion which is not related to this injury. The radiologist recommended that the lesion be further evaluated with an MRI under his personal insurance.

At follow up 12/4/19, Dr. Introcaso advised the IW to continue physical therapy and referred him to an Orthopedic specialist. On 12/13/19 Dr. Disabella recommended an MRI of the cervical spine that was completed on 12/18/19. The MRI revealed a disc protrusion at the C6-7 level with compression of the right C7 nerve root and degenerative changes at the C4-5 and C5-6 levels. At the 1/10/20 exam, the Dr. released him to RTW, modified duty and referred him to pain management (Dr. Smith) for injections.

Dr. Smith evaluated the IW on 1/20/20. She felt he was a candidate for nerve root block injections. IW had a series of injections that took place on 2/19/20, 3/18/20 and 6/1/20. Dr. Smith treated the IW conservatively until the 10/12/20 exam. At that time, due to ongoing radicular symptoms, the IW was referred to Dr. Ponnappan for a surgical consultation.

The IW was scheduled to see Dr. Ponnappan on 11/02/20. Due to difficulties in contacting the IW, he did not see Dr. Ponnapan until 02/15/21. At the 2/15/21 exam, Dr. Ponnappan ordered a repeat MRI. The cervical MRI was completed on 3/8/21 and revealed disc-herniations at C3-4, C4-5, C5-6 and C6-7 with spinal cord compression at the same levels. On 5/17/21, he followed up with Dr. Ponnappan and the Dr. recommended a cervical epidural injection.

On 6/1/21, the IW had a cervical epidural steroid injection. The procedure went well, and he was advised to follow up on 6/14/21. The IW no showed again. The IW followed up on 6/30/21 at which time he was placed at MMI.

UPDATE TO PAR OF 7/6/21

Claim petition was received on 1/8/21. Defense perm eval on 4/20/22 with Dr. Stackhouse found 0% permanency for the cervical spine, low back, and thoracic spine. The Petitioner obtained a permanency report with Dr. Juan Carlos Cornejo found 65% partial total for the cervical spine and 30% partial total for the thoracic spine. The PA made a demand of 27 ½% PT at 2019 rate = 165 wks. at \$249.09 in the amount of \$47,865.00.

The matter was listed on 6/6/23. Defense Counsel and PA have agreed to settle the case for 22 ½% partial total for the cervical injury at 2019 rates = 135 wks. @ \$271.33 = \$36,630.00 plus a lump sum payment of \$5,000 - Sec 20 for the thoracic injury. The next listing is September 19, 2023.

Strategy/Action Plan: 1. Revise Reserves 2. Pay OAS and close file.

<u>Financial Summary:</u>	<u>Indemnity</u>	<u>Medical</u>	<u>Legal</u>	<u>Other</u>	<u>Total</u>
Paid:	\$0.00	\$4,701.53	\$3,918.00	\$6,959.52	\$15,579.05
Outstanding:	\$46,025.60	\$0.00	\$4,250.00	\$2,441.78	\$52,717.38
Total Incurred:	\$46,025.60	\$4,701.53	\$8,168.00	\$9,401.30	\$68,296.43
<u>Proposed Reserve Increase</u>	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<u>Total Proposed Authority</u>	\$46,025.60	\$4,701.53	\$8,168.00	\$9,401.30	\$68,296.43

Reserve Rationale:

Indemnity: \$46,025.60

22 ½% PT (36,630) with PA Fees (4,395.60) = \$41,025.60 plus (5,000) Section 20 for the thoracic spine.

Last committee meeting date and amount authorized: 07/06/21- \$84,225.03

Payment authority requested up to: \$68,296.43 (decrease of \$15,928.60)

Settlement Authority Request CP: 2021-509

Total Authorization SAR Request: \$46,025.60

We are seeking settlement authority for 22 1/2 Partial Total (cervical injury) in the amount of \$36,630 plus costs of \$4,395.60 = \$41,025.60 plus \$5,000 for Section 20 (thoracic injury) for a total settlement in the amount of \$46,025.60

Prior Claims for this Claimant						
<u>DOI</u>	<u>Body Part/Acc Desc</u>	<u>Claim Type</u>	<u>Status</u>	<u>Paid</u>	<u>Incurred</u>	
No Prior Claims						
Claim Count:				0	0	