10 WC 36490, 10 WC Page 1	36491		
STATE OF ILLINOIS COUNTY OF WILLIAMSON)) SS.)	Affirm and adopt (no changes) Affirm with changes Reverse Modify	Injured Workers' Benefit Fund (§4(d)) Rate Adjustment Fund (§8(g)) Second Injury Fund (§8(e) 8) PTD/Fatal denied None of the above
BEFORE TH	IE ILLINOI	S WORKERS' COMPENSATIO	N COMMISSION
Greg Mayhugh, Petitioner,	11IWCC0970		
vs.	NO: 10 WC 36490 10 WC 36491		
State of Illinois/ Menar	d Correction	nal Center	·

DECISION AND OPINION ON REVIEW

Timely Petition for Review having been filed by the Respondent herein and notice given to all parties, the Commission, after considering the issue of the nature and extent of Petitioner's disability and being advised of the facts and law, affirms and adopts the Decision of the Arbitrator, which is attached hereto and made a part hereof.

IT IS THEREFORE ORDERED BY THE COMMISSION that the Decision of the Arbitrator filed May 3, 2011 is hereby affirmed and adopted.

IT IS FURTHER ORDERED BY THE COMMISSION that the Respondent pay to Petitioner interest under §19(n) of the Act, if any.

IT IS FURTHER ORDERED BY THE COMMISSION that the Respondent shall have credit for all amounts paid, if any, to or on behalf of the Petitioner on account of said accidental injury.

SEP 3 0 2011

Respondent.

DATED:

DLG/glc O: 9/29/11

45

James DeMunno

Mario Basurto

ILLINOIS WORKERS' COMPENSATION COMMISSION NOTICE OF ARBITRATOR DECISION

MAYHUGH, GREG

Case#

10WC036490

Employee/Petitioner

10WC036491

STATE OF IL/MENARD CORRECTIONAL CENTER

· Employer/Respondent:

11IWCC0970

On 5/3/2011, an arbitration decision on this case was filed with the Illinois Workers' Compensation Commission in Chicago, a copy of which is enclosed.

If the Commission reviews this award, interest of 0.10% shall accrue from the date listed above to the day before the date of payment; however, if an employee's appeal results in either no change or a decrease in this award, interest shall not accrue.

A copy of this decision is mailed to the following parties:

0969 THOMAS CRICH PC 6 EXECUTIVE DR SUITE 3 FAIRVIEW HTS, IL 62208

0502 ST EMPLOYMENT RETIREMENT SYSTEMS 2101 S VETERANS PARKWAY* PO BOX 19255 SPRINGFIELD, IL 62794-9255

0558 ASSISTANT ATTORNEY GENERAL GILBERT, ROYA 1001 E MAIN ST BLDG #1 CARBONOALE, IL 62901

0498 STATE OF ILLINOIS ATTORNEY GENERAL 100 W RANDOLPH ST 13TH FLOOR CHICAGO, IL 60601-3227

1350 CENTRAL MGMT SERVICES RISK MGMT WORKERS COMPENSATION CLAIMS 201 E MADISON ST SUITE 3C PO BOX 19208 SPRINGFIELD, IL 62794-9208 CERTIFIED as a true and correct copy pursuant to 820 ILCS 305 / 14

MAY 3 2011

AMY MARTERS, Separatory

Hands Westers' Companies ton Commission

STATE OF ILLINOIS)	Injured Workers' Benefit Fund (§4(d))			
)SS.	Rate Adjustment Fund (§8(g))			
COUNTY OF Williamson)	Second Injury Fund (§8(e)18)			
		None of the above			
ARBITRATION DECISION LIL CC097					
	ARBITRATION DECISION	ION LIINCCU97			
Greg Mayhugh		Case # 10 WC 36490			
Employee/Pctitioner					
v.		Consolidated cases: 10 WC 36491			
State of Illinois/Menard Correctional Center					
Employer/Respondent					
An Application for Adjustment of Claim was filed in this matter, and a Notice of Hearing was mailed to each					
party. The matter was heard by the Honorable Andrew Nalefski, Arbitrator of the Commission, in the city of					
Herrin, on 4/13/11. After reviewing all of the evidence presented, the Arbitrator hereby makes findings on the					
disputed issues checked belo	w, and attaches those findings to this d	locument.			
DISPUTED ISSUES					
A. Was Respondent one	rating under and subject to the Illinois	Workers' Compensation or Occupational			
Diseases Act?					
B. Was there an employ	ee-employer relationship?				
C. Did an accident occur	C. Did an accident occur that arose out of and in the course of Petitioner's employment by Respondent?				
D. What was the date of the accident?					
E. Was timely notice of the accident given to Respondent?					
Is Petitioner's current condition of ill-being causally related to the injury?					
G. What were Petitioner's earnings?					
H. What was Petitioner's age at the time of the accident?					
What was Petitioner's marital status at the time of the accident?					
J. Were the medical services that were provided to Petitioner reasonable and necessary? Has Respondent paid all appropriate charges for all reasonable and necessary medical services?					
K. What temporary bene		y medical services?			
TPD T	Maintenance TTD				
F-3	d extent of the injury?				
1. Should penalties or fees be imposed upon Respondent?					
N. 🔲 Is Respondent due an					
O. Other	-				

ICArbDec 2/10 100 W. Randolph Street #8-200 Chicago, IL 60601 312/814-6611 Toll-free 866/352-3033 Web sile: www.iwcc.il.gov Downstate offices: Collinsville &18/346-3450 Peorla 309/671-3019 Rockford 815/987-7292 Springfield 217/785-7084

FINDINGS

11IWCC0970

On 9/6/10 & 9/13/10, Respondent was operating under and subject to the provisions of the Act.

On this date, an employee-employer relationship did exist between Petitioner and Respondent.

On this date, Petitioner did sustain an accident that arose out of and in the course of employment.

Timely notice of this accident was given to Respondent.

Petitioner's current condition of ill-being is causally related to the accident.

In the year preceding the injury, Petitioner earned \$56,808.00; the average weekly wage was \$1,092.46.

On the date of accident, Petitioner was 48 years of age, married with 0 dependent children.

Petitioner has received all reasonable and necessary medical services.

Respondent has in purt paid all appropriate charges for all reasonable and necessary medical services.

Respondent shall be given a credit of **\$all TTD paid** for TTD, **\$0** for TPD, **\$0** for maintenance, and **\$0** for other benefits; for a total credit of **\$all TTD paid**.

Respondent is entitled to a credit of \$0 under Section 8(j) of the Act.

ORDER

ICArbDec p. 2

Respondent shall pay Petitioner permanent partial disability benefits of \$655.48/week for 94.875 weeks, because the injuries sustained caused the 37 1/2% loss of the right arm, as provided in Section 8(e) of the Act.

Respondent shall pay Petitioner permanent partial disability benefits of \$655.48/week for 50.6 weeks, because left elbow injuries sustained caused the 20% loss of the left arm, as provided in Section 8(e) of the Act.

Respondent shall pay medical services of \$115,231.26, as provided in Sections 8(a) and 8.2 of the Act.

Respondent shall be given a credit for medical benefits that have been paid. Respondent shall indemnify and hold petitioner harmless from any claims by any providers of the services for which Respondent is receiving this credit, as provided in Section 8(j) of the Act.

RULES REGARDING APPEALS Unless a party files a Petition for Review within 30 days after receipt of this decision, and perfects a review in accordance with the Act and Rules, then this decision shall be entered as the decision of the Commission.

STATEMENT OF INTEREST RATE If the Commission reviews this award, interest at the rate set forth on the Notice of Decision of Arbitrator shall accrue from the date listed below to the day before the date of payment; however, if an employee's appeal results in either no change or a decrease in this award, interest shall not accrue.

Senature of Arbitrator

MAY 3 - 2011

Greg Mayhugh v. State of IL/ Menard Correctional Ctr. 10 WC 36490 (D/A) 9/6/10) 10 WC 36491 (D/A) 9/13/10

The Arbitrator finds the following facts:

11IWCC0970

These matters were previously heard pursuant to Section 19(b) on 11/12/10. A Decision was issued on 12/14/10 in favor of Petitioner on the issues of causation, medical bills and TTD benefits. No appeal was taken and that Decision is final. It is marked as Arbitrator's Exhibit3.

After 11/12/10, Petitioner continued treating with Dr. Brown and Dr. Paletta. After conservative treatment failed, Dr. Brown and Dr. Paletta performed surgeries on 12/9/10. Dr. Paletta performed a subacromial decompression, bursectomy, and acromioplasty with a distal clavical excision on Petitioner's right shoulder. Dr. Brown performed a right cubital tunnel release with an ulnar nerve transposition. On 1/7/11 Dr. Brown performed a similar surgery on Petitioner's left elbow.

Following surgery, Petitioner underwent physical therapy. He was released to return to full duty work on 2/9/11.

Respondent elected not to have Petitioner examined.

Petitioner testified that he still experience pain in both his right and left elbows with activity. Turning keys and pulling doors increases his elbow symptoms. Repeated pushing, pulling, lifting personal property boxes and reaching causes pain in his right shoulder. Petitioner testified that he continues to take Advil on a regular basis. He uses ice and heat at home. Petitioner's pain in his right and left arms is activity driven.

Therefore the Arbitrator concludes:

As a result of his injuries Petitioner has sustained the loss of 37 ½% of the right arm and 20% loss of the left arm.

Respondent shall pay medical bills of \$115,231.26, subject to the medical fee schedule. Respondent is entitled to credit for amounts paid. Respondent shall indemnify and hold Petitioner harmless for those amounts.