

**WORKERS' COMPENSATION APPEALS BOARD
STATE OF CALIFORNIA**

ALICIA DELGADO, *Applicant*

vs.

**NEW VISTA HEALTH CARE, INC.;
STATE COMPENSATION INSURANCE FUND, *Defendants***

**Adjudication Number: ADJ4457963
Oxnard District Office**

**OPINION AND ORDER
GRANTING PETITION FOR
RECONSIDERATION
AND DECISION AFTER
RECONSIDERATION**

Lien claimant Angoal Medical seeks reconsideration of the April 16, 2026 Findings and Order (F&O), wherein the workers' compensation administrative law judge (WCJ) found that lien claimant failed to establish that applicant's attorney ever requested a medical-legal report from provider Dr. Goalwin. The WCJ ordered the lien disallowed.

Lien claimant contends that the evidentiary record establishes that applicant requested a medical-legal report from Dr. Goalwin.

We have received an Answer from defendant. The WCJ prepared a Report and Recommendation on Petition for Reconsideration (Report), recommending that the Petition be denied.

We have considered the allegations of the Petition for Reconsideration and the contents of the report of the workers' compensation administrative law judge (WCJ) with respect thereto. Based on our review of the record, and for the reasons discussed below, we will grant reconsideration, rescind the F&O, substitute new findings that the lien of Angoal Medical is a reimbursable medical-legal expense, and order reimbursement of the lien along with statutory increase and interest.

FACTS

Applicant claimed injury to her back, neck, shoulders, arms, and psyche while employed as a nurse's aide by defendant New Vista Health Care from April 25, 2002 to April 25, 2003. Defendant denied injury arising out of and in the course of employment (AOE/COE). The parties resolved the case in chief by way of Compromise and Release on November 27, 2007. (Minutes of Hearing, dated December 11, 2020, at p. 2:4.)

On May 5, 2003, applicant filed both a claim form and an Application for Adjudication of Claim. (Ex. 2, DWC-1 Claim Form, dated May 5, 2003; Ex. 3, Application for Adjudication, dated May 5, 2003.) On the same day, applicant designated Elham Nemat, D.C., as her primary treating physician. (Ex. 4, Primary Treating Physician Letter, dated May 5, 2003.)

On October 4, 2003, Julie Goalwin, Ph.D., issued a report entitled "Psychiatric Qualified Medical-Legal Evaluation," referencing a date of evaluation of September 20, 2003. (Ex. 12, Report of Julie Goalwin, Ph.D., dated September 20, 2003.) The accompanying proof of service reflects service on applicant's counsel and defendant. (*Id.* at p. 14.) On the same day, Dr. Goalwin served a "Med/Legal Itemized Statement" on the parties including defendant, in the amount of \$2,990.00, along with an accompanying "Notice and Request for Allowance of Lien." (Ex. 13, Lien and Itemized Statement, dated September 20, 2003.)

On September 30, 2003, Dr. Goalwin assigned the lien to Goalwin Medical Collections pursuant to a purchase agreement. (Ex. 14, Purchase Agreement, dated September 30, 2003.)

On December 11, 2020, lien claimant and defendant proceeded to trial and placed in issue, in relevant part, the lien of Angoal Medical Collections. The parties further framed issues including injury AOE/COE and whether the injury was presumptively compensable pursuant to Labor Code¹ section 5402. Defendant raised the issue of whether Dr. Goalwin's September 20, 2003 report was "a proper medical-legal report," while lien claimant raised issues of penalties and interest. (Minutes of Hearing, dated December 11, 2020, at p. 2:13.)

On February 22, 2021, the WCJ issued his F&A, determining in relevant part that applicant sustained injury AOE/COE based on the presumption found in section 5402. (Finding of Fact No. 2.) The WCJ found the charges of Angoal Medical to be reimbursable as ML-103 expenses and awarded statutory increase and interest pursuant to section 4622. (Finding of Fact No. 5.) The WCJ

¹ All further references are to the Labor Code unless otherwise noted.

also determined, in relevant part, that applicant legally obtained the reporting of Dr. Goalwin. (Findings of Fact, No. 9.)

Defendant timely sought reconsideration, and on May 5, 2021, we granted reconsideration to further study the factual and legal issues in the case.

On September 23, 2025, we issued our Opinion and Decision After Reconsideration (ODAR), in which we affirmed the February 22, 2021 decision, except that we deferred the issues of whether the reporting of Dr. Goalwin was legally obtained, along with the issues of statutory increase and interest. (ODAR, dated September 23, 2025, at p. 8.) We returned the matter to the trial level for further proceedings and development of the record.

On February 24, 2026, the parties appeared at lien trial and stipulated to submit the matter for decision. Neither party offered any additional documentary or testimonial evidence. (Minutes of Hearing, dated February 24, 2026.) The WCJ ordered the matter submitted the same day.

On April 16, 2026, the WCJ issued the instant F&O, determining that, “there is no evidence on this record that applicant’s attorney ever requested that Dr. Goalwin provide a medical-legal report on behalf of the applicant.” (Finding of Fact No. 2.) Consequently, the WCJ ordered that “lien claimant Dr. Goalwin (sic) take nothing.” (Order, No. 1.) In the accompanying Opinion on Decision, the WCJ explained that insofar as our ODAR returned the matter for further proceedings responsive to the issue of “whether a party requested that Dr. Goalwin prepare a medical-legal report ... there is no evidence that any party requested a medical-legal report.” (Opinion on Decision, at p. 1.)

Lien claimant’s Petition observes that the September 20, 2003 report of Dr. Goalwin states that the report was generated in response to a request of applicant’s attorney and that the statements contained in the report were signed under penalty of perjury. (Petition, at p. 3:17.) Lien claimant contends the report of Dr. Goalwin is thus evidence of a referral from applicant’s counsel sufficient to satisfy the requirement of section 4060 as it existed in 2003.

Defendant’s Answer responds that because as our ODAR determined that the record was insufficient to determine compliance with section 4060, lien claimant’s inability or refusal to offer any additional evidence is dispositive of the issue. (Answer, at p. 3:14.)

The WCJ’s Report acknowledges that the report of Dr. Goalwin is addressed to applicant’s counsel and states the report was generated at the request of applicant’s counsel. The WCJ notes, however, that “the fact that Dr. Goalwin addresses her report to the applicant’s attorney and that it

was at her request does not prove that the applicant's attorney in fact requested a medical-legal report ... [i]t only proves that it is possible that applicant's attorney may have sent such a request." (Report, at p. 3.) The WCJ noted that in our ODAR, we "did not find enough evidence to support the finding that some party or attorney requested a medical-legal report," and that "[i]f the Appeals Board found the record wanting on the issue and no one developed the record, then it can hardly be more convincing now." (*Id.* at p. 4.)

DISCUSSION

I.

Former section 5909 provided that a petition for reconsideration was deemed denied unless the Appeals Board acted on the petition within 60 days from the date of filing. (Lab. Code, § 5909.) Effective July 2, 2024, Labor Code section 5909 was amended to state in relevant part that:

- (a) A petition for reconsideration is deemed to have been denied by the appeals board unless it is acted upon within 60 days from the date a trial judge transmits a case to the appeals board.
- (b)
 - (1) When a trial judge transmits a case to the appeals board, the trial judge shall provide notice to the parties of the case and the appeals board.
 - (2) For purposes of paragraph (1), service of the accompanying report, pursuant to subdivision (b) of Section 5900, shall constitute providing notice.

Under section 5909(a), the Appeals Board must act on a petition for reconsideration within 60 days of transmission of the case to the Appeals Board. Transmission is reflected in Events in the Electronic Adjudication Management System (EAMS). Specifically, in Case Events, under Event Description is the phrase "Sent to Recon" and under Additional Information is the phrase "The case is sent to the Recon board."

Here, according to Events, the case was transmitted to the Appeals Board on May 22, 2026, and 60 days from the date of transmission is July 21, 2026. This decision is issued by or on July 21, 2026, so that we have timely acted on the petition as required by section 5909(a).

Section 5909(b)(1) requires that the parties and the Appeals Board be provided with notice of transmission of the case. Transmission of the case to the Appeals Board in EAMS provides

notice to the Appeals Board. Thus, the requirement in subdivision (1) ensures that the parties are notified of the accurate date for the commencement of the 60-day period for the Appeals Board to act on a petition. Section 5909(b)(2) provides that service of the Report and Recommendation shall be notice of transmission.

Here, according to the proof of service for the Report and Recommendation by the workers' compensation administrative law judge, the Report was served on May 22, 2026, and the case was transmitted to the Appeals Board on May 22, 2026. Service of the Report and transmission of the case to the Appeals Board occurred on the same day. Thus, we conclude that the parties were provided with the notice of transmission required by section 5909(b)(1) because service of the Report in compliance with section 5909(b)(2) provided them with actual notice as to the commencement of the 60-day period on May 22, 2026.

II.

As relevant to these proceedings, the issue framed for decision by the parties at the December 11, 2020 lien trial was whether Dr. Goalwin's September 20, 2003 report was "a proper medical legal report." (Minutes of Hearing, dated December 11, 2020, at p. 2:24.)

Section 4620(a) defines a medical-legal expense as a cost or expense that a party incurs "for the purpose of proving or disproving a contested claim." (Lab. Code, § 4620(a).) Lien claimant's initial burden in proving entitlement to reimbursement for a medical-legal expense is to show that a "contested claim" existed at the time the service was performed. Section 4620(b) sets forth the parameters for determining whether a contested claim existed. (Lab. Code, § 4620(b).) "Essentially, there is a contested claim when: 1) the employer knows or reasonably should know of an employee's claim for workers' compensation benefits; and 2) the employer denies the employee's claim outright or fails to act within a reasonable time regarding the claim." (*Colamonico v. Secure Transportation* (2019) (84 Cal.Comp.Cases 1059) (Appeals Board en banc).)

Here, defendant has denied all liability for applicant's claim of injury. (Minutes of Hearing, dated December 11, 2020, at p. 2:13.) The September 20, 2003 report of Dr. Goalwin addresses the compensability of applicant's alleged psychiatric injury. (Ex. 12, Report of Julie Goalwin, Ph.D., dated September 20, 2003, at p. 10.) Thus, the report substantively addresses a contested claim, satisfying the initial requirements for medical-legal reporting under section 4620(a).

Defendant avers, however, that lien claimant has not met its burden of establishing compliance with section 4060 as it existed in 2003, governing the admissibility of and liability for medical-legal reporting in workers' compensation proceedings. The 2003 statute provided, in relevant part:

(a) This section shall apply to disputes over the compensability of any injury. This section shall not apply where injury to any part or parts of the body is accepted as compensable by the employer.

(b) Neither the employer nor the employee shall be liable for any comprehensive medical-legal evaluation performed by other than the treating physician either in whole or in part on behalf of the employee prior to the filing of a claim form and prior to the time the claim is denied or becomes presumptively compensable under Section 5402. However, reports of treating physicians shall be admissible.

(c) If a medical evaluation is required to determine compensability at any time after the period specified in subdivision (b), and the employee is represented by an attorney, each party may select a qualified medical evaluator to conduct a comprehensive medical-legal evaluation. Neither party may obtain more than one comprehensive medical-legal report, provided, however, that any party may obtain additional reports at their own expense. The parties may, at any time, agree on one medical evaluator to evaluate the issues in dispute.

...

(e) Evaluations performed under this section shall not be limited to the issue of the compensability of the injury, but shall address all medical issues in dispute.

(2003 Lab. Code, § 4060.)

Our September 23, 2025 ODAR observed:

Although the report itself indicates that “[t]he reason for the referral is based on the claim that the patient is experiencing emotional consequences due to workplace trauma,” we observe that the record contains no other evidence responsive to the issue of whether Dr. Goalwin was validly selected pursuant to section 4060(c). (*Id.* at p. 1.) It is unclear from this record whether a single comprehensive medical-legal report was generated as to the claim, and whether the September 20, 2003 report in evidence is responsive to the instant claim given that the date of injury listed of May, 2000, while possibly a clerical error, does not correspond to applicant’s claimed cumulative injury of April 25, 2002, through April 25, 2003. (*Id.* at p. 1; Minutes, at p. 2:4.) Moreover, to the extent that the parties have raised the issue of whether Dr. Goalwin was validly selected to provide a medical-legal report, the evidentiary record is silent as to whether applicant sought to nominate Dr. Goalwin as a treating physician under section

4600(a) or as a medical-legal physician under section 4060. As defendant's Petition observes, the record does not divulge whether the applicant's request to Dr. Goalwin constituted as request for consultation, treatment, or a medical legal examination. (Petition, at p. 4:6.)

(ODAR, at pp. 5-6.)

Our ODAR thus returned the matter to the trial level to allow the parties to submit evidence responsive to the issue of the circumstances under which the report of Dr. Goalwin was obtained. Because neither party offered any additional evidence, the WCJ reasonably concluded that lien claimant had not met its burden of establishing that the requirements described in section 4060(c) were met, and ordered the lien disallowed as a result.

However, following our complete review of the entire evidentiary record in this matter as occasioned by lien claimant's Petition, we are persuaded that the evidence is sufficient to support a finding that the September 20, 2003 was a validly obtained and admissible report under section 4060 as it existed in 2003. As is noted above, there is no dispute that the report substantively addresses a contested claim as contemplated by section 4620(a). The report itself states that "[t]he reason for the referral is based on the claim that the patient is experiencing emotional consequences due to workplace trauma," and that the report "will render opinions concerning specific referral questions with respect to the need for psychiatric-psychological diagnosis, psychotherapy, apportionment, and *disputed medical facts*." (Ex. 12, Report of Julie Goalwin, Ph.D., dated September 20, 2003, at p. 1, italics added.)

In addition, we note that the report is addressed to applicant's attorney at the time, and continues, "[p]ursuant to your request, patient was seen for this psychiatric evaluation on [September 20, 2003]. It was asked of me to draw my opinion as to the test results and the potential alleged occupational stress injury effects." (*Ibid.*) The report thus supports the reasonable inference that applicant's counsel requested Dr. Goalwin evaluate applicant and prepare a report addressing "disputed medical facts." (Ex. 12, Report of Julie Goalwin, Ph.D., dated September 20, 2003, at p. 1.)

We further observe that report does not purport to establish a treatment relationship with applicant, but that even were this the case, pursuant to section 4060(b) such reporting would nonetheless be admissible. (2003 Lab. Code, § 4060(b) [reports of treating physicians shall be admissible].) Here, the reporting of Dr. Goalwin issued only after applicant filed her claim form on May 5, 2003. (Ex. 2, DWC-1 Claim Form, dated May 5, 2003; Ex. 3, Application for

Adjudication, dated May 5, 2003.) Thus, while we are persuaded that applicant requested a medical-legal report under section 4060(c), we also observe that irrespective of whether Dr. Goalwin was acting as a treating physician or as a Qualified Medical Evaluator issuing a report on a contested claim, the report would be admissible under section 4060.

We acknowledge the statement in our ODAR that “the record does not divulge whether the applicant’s request to Dr. Goalwin constituted as request for consultation, treatment, or a medical legal examination.” (ODAR, at p. 5.) However, following our complete review of the evidentiary record, we now conclude that our statement was analytically incomplete and thus made in error. We note that the *only* evidence addressing the issue of the referral is the report itself, and that the report makes clear from the outset that it was generated to address contested medical issues and that its genesis was a request by applicant’s counsel. (Ex. 12, Report of Julie Goalwin, Ph.D., dated September 20, 2003, at p. 1.) The parties have identified no countervailing evidence in the record, nor do we discern any.

We are thus persuaded that the September 20, 2003 report of Dr. Goalwin provides a reasonable basis to infer a request for a comprehensive medical-legal valuation under section 4060(c). Accordingly, we will rescind the F&O and substitute new findings that lien claimant has met its burden of establishing that the September 20, 2003 report of Dr. Goalwin was requested by applicant pursuant to section 4060 and that the corresponding lien of Angoal Medical is a reimbursable medical-legal expense. We will order reimbursement of the lien along with statutory increase under section 4622 and interest under section 5800.

For the foregoing reasons,

IT IS ORDERED that reconsideration of the decision of April 16, 2026 is **GRANTED**.

IT IS FURTHER ORDERED as the Decision After Reconsideration of the Workers’ Compensation Appeals Board that the decision of April 16, 2026 is **RESCINDED** with the following **SUBSTITUTED** therefor:

FINDINGS OF FACT

1. Applicant Alicia Delgado sustained injury to her back, neck, shoulders, arms, and psyche while employed as a nurse’s aide by defendant New Vista Health Care from April 25, 2002 to April 25, 2003.

2. The September 20, 2003 report of Julie Goalwin, Ph.D., was a legally obtained medical-legal report pursuant to section 4060 as it existed in 2003.
3. The ML-103 charges of Angoal Medical are subject to statutory increase and statutory interest under Labor Code sections 4622 and 5800, respectively.
4. Angoal Medical Collections is entitled to reimbursement of the filing fee, having demonstrated liability for the charges.

ORDER

- a. The lien of Angoal Medical is ALLOWED in full together with statutory increase pursuant to Labor Code section 4622 and statutory interest pursuant to Labor Code section 5800, less credit for any payments made by defendant herein.

WORKERS' COMPENSATION APPEALS BOARD

/s/ KATHERINE A. ZALEWSKI, CHAIR

I CONCUR,

/s/ KATHERINE WILLIAMS DODD, COMMISSIONER

/s/ ANNE SCHMITZ, DEPUTY COMMISSIONER



DATED AND FILED AT SAN FRANCISCO, CALIFORNIA

July 20, 2026

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

**PAPERWORK AND MORE
STATE COMPENSATION INSURANCE FUND**

SAR/abs

I certify that I affixed the official seal of the
Workers' Compensation Appeals Board to this
original decision on this date. *abs*