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FROM THE DESK OF:
Andrew R. Borah, Esquire
Florida Bar Board Certified Workers' Compensation

January 12, 2017

Ms. Barbara Smith
Employer's Mutual, Inc
700 Central Parkway
Stuart, FL 34994

Re: Claimant: Carl Puskarcik
Employer: City of Hollywood
D/A: 9/7/2007
OJCC No.: 14-023256JL
Our File No.: 0529-0020 ARB
Carrier No.: 1181384991

Dear Ms. Smith:

CMS has approved the proposed MSA of \$93,895.00. After CMS approved such MSA, the claimant went to see Dr. Lawrence Supik, the authorized orthopedic surgeon in the claimant's new area of Sylva, NC. The January 6, 2017 report from Dr. Supik indicates that the claimant needs to undergo a left knee replacement surgery in addition to the previously recommended right knee replacement surgery. Previously, the claimant's doctors had only recommended a right knee replacement surgery. Fortunately, Dr. Supik provided this opinion after the MSA was already provided to CMS. Otherwise, the amount of the MSA would have been a lot more, as it would have had to include the value of a possible left knee replacement surgery.

Dr. Supik also indicated in his report that the claimant wants to move forward with the right knee replacement surgery. The claimant told Dr. Supik that he would be scheduling such surgery to occur sometime in the Spring. If you are going to have any chance of getting this case settled, you will need to get the case settled before the claimant undergoes the right knee replacement surgery, as the cost of the right knee replacement surgery is already in the \$93,895.00 MSA. I am not sure if Dr. Supik is agreeing to accept Florida Fee Schedule, but if not, the actual cost of the surgery would be a lot more than what was allocated in the MSA, which is another reason why you should try to get this case settled before the claimant undergoes the right knee replacement surgery.

As I previously indicated, in addition to the exposure that the MSA represents, you also have exposure for providing treatment for the claimant's denied melanoma condition. I recommend allocating \$15,000.00 to your settlement authority for possible future treatment for the claimant's

Barbara Smith
January 12, 2017
Page 2
Re: Carl Puskarcik v. City of Hollywood

melanoma condition. If the claimant undergoes the right total knee replacement surgery, the claimant will be on a no-work status/have light duty restrictions for about six months prior to reaching MMI; therefore, you will have additional indemnity exposure as well. Also, as indicated above, in light of Dr. Supik's opinions, you now have potential exposure for providing the claimant with a left total knee replacement surgery.

I previously recommended that you obtain \$125,000.00 to get the entire case settled. Now with the possibility of a left total knee replacement surgery in play, that would be an amazing settlement. I still have doubt as to whether the claimant definitely wants to undergo a total knee replacement surgery; therefore, I do not recommend that you obtain any additional authority over the \$125,000.00 I have already recommended. I think \$125,000.00 is a decent amount of money, especially if the claimant is not 100% interested in undergoing a total knee replacement surgery, and I do not think the claimant is, or else the claimant would not be entertaining the possibility of settlement and would just be proceeding with surgery. If you have any questions regarding this matter, please do not hesitate to contact me.

Sincerely,

A handwritten signature in black ink, appearing to read "Andrew R. Borah".

Andrew R. Borah

ARB/stf
cc: Tanya Bouloy