BRB No. 12-0555 BLA

BOBBY E. DANIELS	)	
	)	
Claimant-Respondent	)	
	)	
v.	)	
	)	
BROOKS RUN MINING COMPANY, LLC	)	DATE ISSUED: 05/29/2013
	)	
and	)	
	)	
BRICKSTREET MUTUAL INSURANCE COMPANY, INCORPORATED	)	
	)	
Employer/Carrier-Petitioners	)	
	)	
DIRECTOR, OFFICE OF WORKERS' COMPENSATION PROGRAMS, UNITED STATES DEPARTMENT OF LABOR	)	
	)	
Party-in-Interest	)	DECISION and ORDER

Appeal of the Decision and Order – Award of Benefits of Richard T. Stansell-Gamm, Administrative Law Judge, United States Department of Labor.

Joseph E. Wolfe and Ryan C. Gilligan (Wolfe Williams Rutherford & Reynolds), Norton, Virginia, for claimant.

Francesca Tan and William S. Mattingly (Jackson Kelly PLLC), Morgantown, West Virginia, for employer/carrier.

Michael J. Rutledge (M. Patricia Smith, Solicitor of Labor; Rae Ellen James, Associate Solicitor; Michael J. Rutledge, Counsel for Administrative Litigation and Legal Advice), Washington, D.C., for the Director, Office of Workers' Compensation Programs, United States Department of Labor.

Before: SMITH, McGRANERY, and HALL, Administrative Appeals Judges.

PER CURIAM:

Employer/carrier (employer) appeals the Decision and Order – Award of Benefits (2010 BLA 5651) of Administrative Law Judge Richard T. Stansell-Gamm, rendered on a claim filed on July 15, 2009, pursuant to the provisions of the Black Lung Benefits Act, as amended 30 U.S.C. §§901-944 (Supp. 2011) (the Act). In a Decision and Order dated June 28, 2012, the administrative law judge credited claimant with at least twenty-seven years of coal mine employment, and adjudicated the claim pursuant to the regulations at 20 C.F.R. Part 718. The administrative law judge found that the evidence was sufficient to establish the existence of complicated pneumoconiosis and therefore, found that claimant invoked the irrebuttable presumption of total disability due to pneumoconiosis pursuant to 20 C.F.R. §718.304. Accordingly, the administrative law judge awarded benefits.

On appeal, employer argues that the administrative law judge's finding of complicated pneumoconiosis is based on a selective analysis of the x-ray readings and medical opinions, and fails to account for all of the relevant evidence. Claimant responds, urging affirmance of the administrative law judge's award of benefits. The Director, Office of Workers' Compensation Programs (the Director), has filed a limited brief, requesting that the case be remanded for further consideration in view of the administrative law judge's failure to consider all of Dr. Scott's radiological qualifications.[1]

The Board's scope of review is defined by statute. The administrative law judge's Decision and Order must be affirmed if it is supported by substantial evidence, is rational, and is in accordance with applicable law.[2] 33 U.S.C. §921(b)(3), as incorporated by 30 U.S.C. §932(a); *O'Keeffe v. Smith, Hinchman & Grylls Associates, Inc.*, 380 U.S. 359 (1965).

[1] We affirm, as unchallenged by the parties on appeal, the administrative law judge's finding that claimant worked at least twenty-seven years in coal mine employment. *See Skrack v. Island Creek Coal Co.*, 6 BLR 1-710 (1983); Decision and Order at 21.

[2] As claimant's coal mine employment was in Virginia and West Virginia, this case arises within the jurisdiction of the United States Court of Appeals for the Fourth Circuit. *See Shupe v. Director, OWCP*, 12 BLR 1-200, 1-202 (1989) (en banc); Director's Exhibit 3.

In order to establish entitlement to benefits in a living miner's claim pursuant to 20 C.F.R. Part 718, claimant must prove that he suffers from pneumoconiosis, that the pneumoconiosis arose out of coal mine employment, that he is totally disabled and that his disability is due to pneumoconiosis. *See* 20 C.F.R. §§718.3, 718.202, 718.203, 718.204. Failure to establish any one of these elements precludes a finding of entitlement. *Trent v. Director, OWCP*, 11 BLR 1-26 (1987); *Perry v. Director, OWCP*, 9 BLR 1-1 (1986) (en banc).

Section 411(c)(3) of the Act, 30 U.S.C. §921(c)(3), as implemented by 20 C.F.R. §718.304 of the regulations, provides that there is an irrebuttable presumption of total disability due to pneumoconiosis if the miner suffers from a chronic dust disease of the lung which, (a) when diagnosed by chest x-ray, yields one or more large opacities (greater than one centimeter in diameter) classified as Category A, B, or C; (b) when diagnosed by biopsy, yields massive lesions in the lung;[3] or (c) when diagnosed by other means, is a condition which would yield results equivalent to (a) or (b). 30 U.S.C. §921(c)(3); 20 C.F.R. §718.304.

The introduction of legally sufficient evidence of complicated pneumoconiosis does not, however, automatically invoke the irrebuttable presumption found at 20 C.F.R. §718.304. The administrative law judge must examine all the evidence on this issue, i.e., evidence of simple and complicated pneumoconiosis, as well as evidence of no pneumoconiosis, resolve any conflicts, and make a finding of fact. *See Westmoreland Coal Co. v. Cox*, 602 F.3d 276, 24 BLR 2-269 (4th Cir. 2010); *Director, OWCP v. Eastern Coal Corp.* [*Scarbro*], 220 F.3d 250, 22 BLR 2-93 (4th Cir. 2000); *Lester v. Director, OWCP*, 993 F.2d 1143, 1145-46, 17 BLR 2-114, 2-117-18 (4th Cir. 1993); *Melnick v. Consolidation Coal Co.*, 16 BLR 1-31, 1-33-34 (1991) (en banc).

I. The Analog X-ray Evidence – 20 C.F.R. §718.304(a)

Relevant to 20 C.F.R. §718.304(a), the administrative law judge found that the record contained eleven ILO classified readings of six analog x-rays dated March 21, 2002, March 21, 2008, August 27, 2009, November 10, 2009, November 5, 2010 and December 7, 2010, along with one non-ILO classified reading of an analog x-ray dated April 5, 2002.[4] Decision and Order at 8-9.

The March 21, 2002 x-ray was read as positive for simple pneumoconiosis, but negative for complicated pneumoconiosis, by Dr. Ahmed, dually qualified as a Board-certified radiologist and B reader. Claimant's Exhibit 4. The April 5, 2002 x-ray was also read by Dr. Ahmed, as showing underlying chronic obstructive pulmonary disease and pneumoconiosis, but he did not give an ILO classification. *Id.* Additionally, Dr.

[3] The record contains no biopsy evidence pursuant to 20 C.F.R. §718.304(b).

Ahmed read the March 21, 2008 x-ray as positive for simple, but negative for complicated, pneumoconiosis. *Id*.

The August 27, 2009 x-ray was read as positive for simple and complicated pneumoconiosis, Category A, by Drs. DePonte and Alexander, both of whom are dually qualified radiologists. Director's Exhibits 11, 13. The same x-ray was read as positive for simple pneumoconiosis, but negative for complicated pneumoconiosis, by Dr. Scott, also dually qualified. Employer's Exhibits 5, 7.

The November 10, 2009, November 5, 2010 and December 7, 2010 x-rays were read as positive for simple and complicated pneumoconiosis, Category A, by Dr. DePonte. Director's Exhibit 12; Claimant's Exhibits 2, 3. The same x-rays were read as positive for simple pneumoconiosis, but negative for complicated pneumoconiosis by Dr. Scott. Employer's Exhibits 6, 7.

In resolving the conflict in the x-ray evidence, the administrative law judge gave controlling weight to the readings by the dually qualified radiologists. Decision and Order at 9-11. The administrative law judge found that the March 21, 2002 and March 21, 2008 x-rays are negative for complicated pneumoconiosis, based on Dr. Ahmed's uncontradicted readings of these respective x-rays. *Id*. at 9. He considered Dr. Ahmed's reading of the April 5, 2002 x-ray to be "inconclusive" because Dr. Ahmed did not address the nature of the pneumoconiosis he observed. *Id*. at 9-10. With respect to the August 27, 2009 x-ray, the administrative law judge concluded that it was positive, based on the preponderance of the positive readings by dually qualified radiologists. *Id*. at 10. Because he considered Drs. DePonte and Scott to be "similarly well-qualified," the administrative law judge found that "their professional disagreement renders the November 10, 2009, November 5, 2010, and December 7, 2010 chest x-rays inconclusive" for complicated pneumoconiosis. *Id*.

Weighing all of the x-ray evidence together, the administrative law judge gave controlling weight to the August 27, 2009 x-ray, "given the progressive nature of pneumoconiosis, and since more than [seventeen] months elapsed between the negative March 21, 2008 study and the positive August 27, 2009 film[.]" Decision and Order at 10. Therefore, the administrative law judge concluded that claimant established the existence of complicated pneumoconiosis, based on the analog x-ray evidence, at 20 C.F.R. §718.304(a).

Employer contends that the administrative law judge's finding that the April 5, 2002 x-ray is inconclusive is "irrational and factually incorrect." Employer's Brief in

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[4] The administrative law judge mistakenly identified this x-ray as being taken on April 2, 2002. Decision and Order at 8; *see* Claimant's Exhibit 4.

Support of Petition for Review at 7. Employer maintains that, while Dr. Ahmed did not render an ILO classification, his reading must be considered negative for complicated pneumoconiosis, as he made no diagnosis of the disease. *Id*. We disagree. The significance of narrative x-ray readings that make no mention of complicated pneumoconiosis is an issue to be resolved by the administrative law judge, in the exercise of his or her discretion as fact-finder. *See Marra v. Consolidation Coal Co.*, 7 BLR 1-216 (1984). We conclude that the administrative law judge acted within his discretion in finding that the April 5, 2002 x-ray was "inconclusive," as Dr. Ahmed diagnosed pneumoconiosis but was silent as to the presence or absence of complicated pneumoconiosis, and did not specify the size of the opacity observed in the left lower lung. Decision and Order at 9-10; *see Milburn Colliery Co. v. Hicks*, 138 F.3d 524, 21 BLR 2-323 (4th Cir. 1998); *Sterling Smokeless Coal Co. v. Akers*, 131 F.3d 438, 21 BLR 2-269 (4th Cir. 1997); *Adkins v. Director, OWCP*, 958 F.2d 49, 16 BLR 2-61 (4th Cir. 1992).

Employer also argues that the administrative law judge erred in failing to consider all of the relevant radiological qualifications of Dr. Scott. Specifically, employer asserts that Dr. Scott has superior qualifications, compared to those of Drs. DePonte and Alexander, based on Dr. Scott's position as a professor of radiology at Johns Hopkins University School of Medicine. *See* Employer's Exhibit 7; Employer's Post-Hearing Brief at 5. The Director agrees with employer that the administrative law judge erred by not properly considering all of Dr. Scott's credentials. Director's Brief at 7.

The regulation at 20 C.F.R. §718.202(a)(1) specifically provides that "[a] chest X-ray . . . may form the basis for a finding of the existence of pneumoconiosis," and, in cases "where two or more X-ray reports are in conflict, in evaluating such X-ray reports consideration shall be given to the radiological qualifications of the physicians interpreting such X-rays." 20 C.F.R. §718.202(a)(1). Further, "[t]he adjudicator should consider any relevant factor in assessing a physician's credibility, and each party may prove or refute the relevance of that factor." 65 Fed. Reg. 79,920, 79,945 (Dec. 20, 2000), *citing Worhach v. Director, OWCP*, 17 BLR 1-105, 1-108 (1993). A physician's professorship in radiology is one such relevant factor. *Id*. at 1-108; *see Melnick v. Consolidation Coal Co.*, 16 BLR 1-31, 1-37 (1991) (en banc).

Because the administrative law judge did not indicate in his Decision and Order that he gave consideration to Dr. Scott's credentials as a professor of radiology in rendering his findings at 20 C.F.R. §718.304(a), his Decision and Order does not satisfy the Administrative Procedure Act (APA), as it does not address the weight accorded all of the relevant evidence.[5] *See Wojtowicz v. Duquesne Light Co.*, 12 BLR 1-162, 1-165

[5] The Administrative Procedure Act requires that every adjudicatory decision be accompanied by a statement of "findings and conclusions, and the reasons or basis

(1989). We, therefore, vacate the administrative law judge's finding that claimant established the existence of complicated pneumoconiosis, based on the x-ray evidence at 20 C.F.R. §718.304(a).

In reweighing the analog x-ray evidence on remand, the administrative law judge must address the weight he accords Dr. Scott's opinion, taking into account all of his relevant radiological qualifications.[6] Contrary to employer's contention, however, the administrative law judge is not required to find that Dr. Scott is the most qualified physician or assign controlling weight to his negative readings for complicated pneumoconiosis. Rather, the administrative law judge has discretion to determine the weight to accord Dr. Scott's credentials and is required only to provide "some reasoned explanation" for his findings.[7] *Adkins*, 958 F.2d at 52, 16 BLR at 2-61; *see Chaffin v. Peter Cave Coal Co.*, 22 BLR 1-294, 1-302 (2003); *Worhach*, 17 BLR at 1-108.

Additionally, there is no merit to employer's contention that, if the most recent x-rays of record, dated November 10, 2009, November 5, 2010 and December 7, 2010 are in equipoise, "claimant must lose." Employer's Brief in Support of Petition for Review at 8. If an x-ray is in equipoise, it does not establish the presence *or absence* of pneumoconiosis. The United States Court of Appeals for the Fourth Circuit has held that

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therefor, on all material issues of fact, law, or discretion presented on the record." 5 U.S.C. §557(c)(3)(A), as incorporated into the Act by 5 U.S.C. §554(c)(2), 33 U.S.C. §919(d) and 30 U.S.C. §932(a); *see also Wojtowicz v. Duquesne Light Co.*, 12 BLR 1-162 (1989).

[6] Employer maintains that the administrative law judge "failed to provide any reason, but for head-counting, why the interpretations of Drs. DePonte and Alexander outweigh Dr. Scott's contrary interpretation of the August 27, 2009 x-ray." Employer's Brief in Support of Petition for Review at 8. On remand, the administrative law judge is instructed to consider all of the relevant qualifications of the physicians and may then properly rely on the quality and quantity of the x-ray evidence in determining whether claimant has complicated pneumoconiosis. *Adkins v. Director, OWCP*, 958 F.2d 49, 16 BLR 2-61 (4th Cir. 1992).

[7] The Director maintains that Dr. Scott's "teaching position is a relevant radiological qualification that the [administrative law judge] should have expressly considered." Director's Brief at 9. However, the Director states that the administrative law judge is not required to grant controlling weight to Dr. Scott's opinion as "there are sound reasons to question Dr. Scott's apparent expertise and his conclusions in this case. Dr. Scott's curriculum vitae does not evidence any particular experience in identifying pneumoconiosis on chest x-ray (other than his status as a B reader)." *Id*.

it is rational to credit more recent evidence, solely on the basis of recency, only if that evidence shows that the miner's condition has progressed or worsened. *See Adkins*, 958 F.2d at 52, 16 BLR at 2-65. Under *Adkins*, where the conflict in the x-ray evidence goes only to the severity of the disease, a more recent x-ray is not entitled to greater weight than an earlier positive x-ray, if the later x-ray is inconclusive or in equipoise. *Id*. Moreover, contrary to employer's contention, the administrative law judge is required to make a finding with respect to each x-ray and then determine, based on his consideration of the x-ray evidence as a whole, whether claimant has established the existence of complicated pneumoconiosis at 20 C.F.R. §718.304(a). *See Lester*, 993 F.2d at 1145-46, 17 BLR at 2-117-18; *Melnick*, 16 BLR at 33-34.

II. Other Evidence – 20 C.F.R. §718.304(c)

We agree with the Director that employer's arguments remaining allegations of error should be rejected. Nevertheless, in the interest of judicial economy, we will address them. Employer challenges the administrative law judge's finding that claimant established the existence of complicated pneumoconiosis at 20 C.F.R. §718.304(c). Under this subsection, the administrative law judge considered a digital x-ray, a CT scan, claimant's treatment records and four medical opinions. The administrative law judge found that claimant established the existence of complicated pneumoconiosis, based on a positive digital x-ray[8] and the medical opinion of Dr. Al-Khasawneh. Decision and Order at 21.

Employer contends that the administrative law judge did not give proper weight to the negative CT scan dated January 30, 2009, and "made a medical determination" in finding that it was less probative of claimant's condition. Employer's Brief in Support of Petition for Review at 12. We disagree. The administrative law judge acknowledged that the January 30, 2009 CT scan was negative for complicated pneumoconiosis.[9] Decision

[8] The record contains one digital x-ray, dated February 10, 2010, interpreted as positive for complicated pneumoconiosis by Dr. Alexander, a dually qualified radiologist, and negative for complicated pneumoconiosis by Dr. Hippensteel, a B reader. Director's Exhibit 14; Claimant's Exhibit 1. The administrative law judge credited the positive reading by Dr. Alexander over the contrary negative reading by Dr. Hippensteel, based on Dr. Alexander's superior qualifications. Decision and Order at 11. The administrative law judge concluded that the digital x-ray was positive and supportive of claimant's burden of proof. *Id*.

[9] There are three readings of the January 30, 2009 CT scan. Claimant's Exhibits 4, 5; Employer's Exhibit 8. Dr. Creasy read the scan as revealing small pulmonary nodules, measuring eight to nine millimeters, likely due to an inflammation or infection process. Claimant's Exhibit 4. He did not identify a large opacity related to pneumoconiosis. *Id*.

and Order at 13. Contrary to employer's argument, the administrative law judge did not improperly act as a medical expert and find that digital x-rays are a better diagnostic tool than CT scans. The administrative law judge noted Dr. Hippensteel's explanation that a CT scan is superior to, and more sensitive than, a chest x-ray. *Id*. However, the administrative law judge found that the probative value of the CT scan results was diminished as it is "the oldest of the three radiological studies" and the scan was limited to the thorax and did not include the lung apices. *Id*. As the administrative law judge rationally explained, "this distinction is significant because Dr. DePonte indicated in her chest x-ray interpretations that the coalescence of small opacities and the bilateral large pulmonary opacities were located in the lung apices." *Id*.; *see Milburn Colliery Co. v. Hicks*, 138 F.3d 524, 533, 21 BLR 2-323, 2-336 (4th Cir. 1998); *Sterling Smokeless Coal Co. v. Akers*, 131 F.3d 438, 441, 21 BLR 2-269, 2-274 (4th Cir. 1997). Because the administrative law judge acted within his discretion in assessing the credibility of the evidence, we affirm his finding that, as the January 30, 2009 CT scan "did not include the lung apices, it loses probative force in regards to the large opacities in the lung apices." Decision and Order at 13; *see Underwood v. Elkay Mining, Inc.*, 105 F.3d 946, 949, 21 BLR 2-23, 2-28 (4th Cir. 1997).

The administrative law judge also weighed the medical opinions of Drs. Al-Khasawneh and Habre, that claimant has complicated pneumoconiosis, against the contrary opinions of Drs. Hippensteel and Fino. Director's Exhibits 11, 14; Claimant's Exhibits 2, 3; Employer's Exhibits 3, 4, 12, 13. The administrative law judge found that Dr. Al-Khasawneh's opinion was reasoned and documented because it was based on Dr. Alexander's positive interpretation of the August 2009 x-ray that he reviewed, along with the preponderance of the x-ray evidence as a whole. Decision and Order at 20. He gave little weight to Dr. Habre's opinion because it was not sufficiently documented. *Id*. The administrative law judge also assigned little weight to the opinion of Dr. Hippensteel, because he relied on inaccurate documentation, and to the opinion of Dr. Fino, because he relied on evidence that was not admitted into the record. *Id*. at 20-21. Weighing all the evidence together, the administrative law judge found that claimant established the existence of complicated pneumoconiosis at 20 C.F.R. §718.304(c), based on the positive digital x-ray dated February 9, 2010 and Dr. Al-Khasawneh's opinion. *Id*. at 21.

Employer argues that the administrative law judge erred in giving controlling weight to the diagnosis of complicated pneumoconiosis by Dr. Al-Khasawneh. To the

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Dr. DePonte noted that the scan was limited to the thorax and showed simple pneumoconiosis, but "[n]o large [pulmonary] opacities[.]" Claimant's Exhibit 5. Dr. Hippensteel also read the scan as revealing simple pneumoconiosis along with a 3.5 cm density consistent with sarcoidosis or a tumor, but not related to pneumoconiosis. Employer's Exhibit 8.

extent that the administrative law judge's weighing of the x-ray evidence influenced his determination to credit the opinion of Dr. Al-Khasawneh, we agree that we must vacate the administrative law judge's finding at 20 C.F.R. §718.304(c). Contrary to employer's contentions, however, the administrative law judge permissibly assigned less probative weight to Dr. Hippensteel's opinion, that claimant does not have complicated pneumoconiosis, as it was based, in part, on Dr. Hippensteel's negative reading of the February 9, 2010 digital x-ray, which was read by a more qualified physician as positive for complicated pneumoconiosis, and based on the CT scan, which the administrative law judge found was not probative of whether claimant has complicated pneumoconiosis in his lung apices. *See Hicks*, 138 F.3d at 533, 21 BLR at 2-341; *Akers*, 131 F.3d at 441, 21 BLR at 2-275-76; Decision and Order at 20.

With respect to Dr. Fino's opinion that claimant does not have complicated pneumoconiosis, the administrative law judge found that it has "diminished probative value due to his reliance on his interpretation of the February 9, 2010 chest x-ray which due to evidentiary restrictions has not been admitted into the evidence." Decision and Order at 21; Employer's Exhibits 3, 4, 13. Employer contends that the administrative law judge's ruling is overly "punitive," because Dr. Fino reviewed the miner's treatment records and all of the other examination reports of record in rendering his opinion, and his reading of the February 9, 2010 x-ray was identical to that of Dr. Hippensteel.

When an administrative law judge determines that a physician relied upon inadmissible evidence, he has several available options, including: excluding the report, redacting the objectionable content, asking the physician to submit a new report, or factoring in the physician's reliance upon the inadmissible evidence when deciding the weight to which his opinion is entitled. *See Keener v. Peerless Eagle Coal Co.*, 23 BLR 1-229 (2007) (en banc); *Brasher v. Pleasant View Mining Co.*, 23 BLR 1-141 (2006); *Harris v. Old Ben Coal Co.*, 23 BLR 1-98 (2006) (en banc) (McGranery & Hall, JJ., concurring and dissenting). Because the administrative law judge permissibly exercised his discretion, we affirm his decision to accord Dr. Fino's opinion, that claimant does not have complicated pneumoconiosis, less weight . *See Hicks*, 138 F.3d at 533, 21 BLR at 2-335; *Akers*, 131 F.3d at 441, 21 BLR at 2-275-76.

III. Remand Instructions

On remand, the administrative law judge must reconsider the analog x-ray evidence and render findings at 20 C.F.R. §718.304(a). If the analog x-ray evidence is sufficient to establish the existence of complicated pneumoconiosis, the administrative law judge may reinstate his determination that claimant invoked the irrebuttable

presumption, as there is no contrary probative evidence to consider.[10] *See Cox*, 602 F.3d at 285, 24 BLR at 2-284; *Scarbro*, 220 F.3d at 256, 22 BLR at 2-101; *Lester*, 993 F.2d at 1145-46, 17 BLR at 2-117-18; *Melnick*, 16 BLR at 33-34. Thus, the administrative law judge may reinstate his award of benefits. However, if claimant is unable to establish that he has complicated pneumoconiosis pursuant to 20 C.F.R. §718.304, the administrative law judge must further consider whether claimant established entitlement under amended Section 411(c)(4) of the Act, 30 U.S.C. §921(c)(4),[11] or alternatively, under 20 C.F.R. §§718.202(a), 718.203, and 718.204(b), (c).

[10] We have affirmed the administrative law judge's credibility determinations with respect to the digital x-ray evidence and the medical opinions of Drs. Fino and Hippensteel pursuant to 20 C.F.R. §718.304(c).

[11] Congress enacted amendments to the Black Lung Benefits Act, which apply to claims filed after January 1, 2005, that were pending on or after March 23, 2010. Relevant to this case, amended Section 411(c)(4) provides a rebuttable presumption that that a miner is totally disabled due to pneumoconiosis in cases where a totally disabling respiratory or pulmonary impairment and fifteen years of underground coal mine employment, or coal mine employment in conditions substantially similar to those in an underground mine, are established. 30 U.S.C. §921(c)(4), *amended by* Pub. L. No. 111-148, §1556(a), 124 Stat. 119, 260 (2010).

Accordingly, the administrative law judge's Decision and Order – Award of Benefits is affirmed in part and vacated in part, and the case is remanded to the administrative law judge for further consideration consistent with this opinion.

SO ORDERED.

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ROY P. SMITH
Administrative Appeals Judge

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REGINA C. McGRANERY
Administrative Appeals Judge

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BETTY JEAN HALL
Administrative Appeals Judge