



OJI On the Job Injury

Q1. Who is eligible for OJI?

Regular, full-time city employees are eligible for medical & lost time coverage. Temporary and part-time employees are eligible for medical coverage only.

The following employees are **ineligible** for lost time benefits under this policy:

1. Recruits within the Police and Fire Services Divisions
2. Temporary employees

Q2. What is covered under an approved OJI claim?

Medical payments and lost time for full time EE's.

Medical payments for part time EE's.

Q3. What is the process for reporting Injuries and Occupational Disease/Illness?

It is the employee's responsibility to notify his/her supervisor immediately after an injury or exposure has occurred. If immediate reporting is not possible, the employee must report the injury or exposure as soon as reasonably possible, but no more than five (5) days after the injury or exposure occurred.

If an injury or exposure results in an occupational disease/illness, the employee must notify the supervisor within thirty (30) calendar days of diagnosis.

Q4. Are there any eligibility requirement to claim the cancer presumption?

Yes. The eligibility requirements are Exposure, Length of Employment, and an Annual Cancer Screening. There is a Cancer Screening Form (CSF) that you can take to your personal doctor or LifeSigns to document your exam. It is your responsibility to keep this record.

LifeSigns

1727 Kirby Pkwy #100, Memphis, TN 38120

901-685-5520

Email: support@westclinic.com

Q5. How are injuries reported? Who reports employee injuries?

Injuries are reported to Sedgwick by phone or electronically by the employee's direct supervisor.



Q6. How much time does an Injured Employee have under an approved OJI?

To qualify an employee for lost time, the treating physician must certify that the employee is totally unable to perform his/her job duties during the leave period. It is the employee's responsibility to provide the city with such certification.

Employees may receive up to **180** days of lost time payments, based on medical need.

An employee who is a member of a sick leave bank at the time of Injury, or who does not have sufficient service with the city to qualify for membership in a sick leave bank at the time of injury, whose medically necessary leave exceeds available lost time payments, may apply for grants from his/her Sick Leave Bank. (See the applicable Sick Leave Bank guidelines for the procedure).

Lost time is counted from the first full day of the injury, illness, or exposure, until the employee returns -to full duty.

OJI Lost time runs concurrently with any FMLA leave for which the employee is eligible.

If the employee is accommodated in the workplace, the employee is not eligible to receive lost time payments. Employees may receive up to 180 days of lost time payments, based on medical need.

Q7. What if I don't receive my wages while out on an approved OJI?

Contact your division payroll to ensure the OJI lost time voucher has been processed. If the voucher has not been received by your division payroll, please contact your Sedgwick adjuster. If you can't reach your adjuster, please contact the OJI Coordinator office.

Q8. What should I do if I receive medical bills on an approved OJI?

Please reach out to your assigned Sedgwick adjuster via phone, email or fax providing the received outstanding bill.

Sedgwick Questions or concerns: 2962CityofMemphis@sedgwick.com or 859-280-4803

City of Memphis OJI Question or concerns: OJIQuestions@memphistn.gov or 901-636-6459

Q9. Will my personal sick time be used on an approved OJI?

Sick time is often used for covering wages until a decision is determined regarding the OJI claim. If the claim is approved the Sedgwick Adjuster will send an OJI lost time voucher covering any approved lost time owed. The OJI lost time voucher is sent to the OSHA Coordinator/Division payroll.



Q10. Can I seek medical treatment from my own doctor?

No, for initial treatment, the injured employee may go to any emergency facility or any non-emergency facility on the Panel of Physicians for immediate treatment. Authorization and/or payment for an initial visit with a health care provider does not deem an injury, exposure, or illness compensable. Compensability is determined by the TPA. In the event the employee’s injury is not deemed compensable, the employee will be personally responsible for any and all treatment.

If follow-up care is necessary after an employee’s initial visit, the employee must contact the TPA to seek authorization for follow-up care. The TPA must present appropriate options from the city’s Panel of Physicians to enable the employee to select a physician. The employee must complete a Choice of Physician Form upon receiving follow-up treatment.

Q11. Can I change my Treating OJI Physician?

Employees may only change treating physicians upon approval of the OJI office or designee. Once approved, the new physician becomes the employee’s recognized treating physician and further treatment by the original treating physician will not be approved.

Q12. If I am released back to work full duty, but need additional time off with the same injury will my lost time reset?

If an employee returns to work and is subsequently required to take additional time off work for the same Injury/Illness/Exposure, Lost time **does not** reset, but accumulates for each instance of leave **related to that** Injury/Illness/Exposure.

Q13. Where can I go to be treated with an OJI in the case of an Emergency?

For initial treatment, the injured employee may go to any emergency facility or any non-emergency facility on the Panel of Physicians for immediate treatment.

<u>Baptist Hospitals:</u>	6019 Walnut Grove Rd	901-226-5000
	1500 West Poplar Ave	901-861-9000(Collierville)
<u>Methodist Hospital:</u>	3960 New Covington Pike	901-516-5200(North)
	1300 Wesley Drive	901-516-3700(South)
	7691 Poplar	901-516-6418(Germantown)
	1265 Union	901-516-7000(University)
<u>Regional Medical Center at Memphis Trauma Center:</u>	877 Jefferson	901-545-7100
<u>St Francis Hospital:</u>	2986 Kate Bond Rd	901-820-7000 (Bartlett)
	5959 Park Ave	901-765-1000 (Main)



Q14. Where can I go to be treated with an OJI for a Minor Injury?

For initial treatment, the injured employee may go to any emergency facility or any nonemergency facility on the Panel of Physicians for immediate treatment.

<u>Concentra Medical Center:</u> (8a-5p M-F) 3965 S. Mendenhall Rd, Suite 6 Bldg. G	901-365-1800
<u>Concentra Medical Center:</u> (8a-5p M-F) 2831 Airways Building A, Suite 102	901-348-0200
<u>Honeycomb Medical Group:</u> (8a-4:30pm M-F) 2829 Lamar Avenue	901-345-6700
<u>Baptist Minor Medical Center</u> (8-5 M-F, 8-2 S&S) 670 N. Germantown Parkway, Ste 18	901-753-7686
<u>Methodist Minor Medical</u> (8a-6p M-Sun) 8071 Winchester	901-756-6056
<u>Methodist Minor Medical</u> (8a-6p M-Sun) 8095 Club Parkway	901-758-6035
<u>Methodist Minor Medical</u> (8a-8p M-Sun) 1803 Union Avenue	901-722-3152

Q15. If I am injured, can I receive lost time if I decide to take off without Physician Approval?

No, an employee may not receive lost time benefits unless Authorized by the OJI Treating Physician.

Q16. If I am off work due to an OJI, can I continue to engage in other Employment Activities?

An employee may NOT, directly, or indirectly, engage in other gainful employment activities of any kind while receiving lost time payments. The city will terminate OJI benefits for any employee found to be engaging in other gainful employment activities of any kind while receiving lost time payments. An employee receiving benefits under this program will be denied benefits if the city learns that an employee engaged in OJI abuse.

Q17. If I am medically unable to return to work what are my options?

After an employee's physician-determined recovery period for an injury, exposure or illness, employees who have been determined to be medically unable to perform the full scope of their job duties and unable to return to full duty, must consider and exercise one or more of the following options within **thirty (30)** days of being advised by the treating physician that return to full duty will be impossible:

1. Apply for **job reassignment** under the Americans with Disabilities Act Amendments Act (ADAAA).
2. Apply for Long Term Disability Income Plan Benefits and/or Social Security Disability Benefits, if eligible. The employee must meet the requirements of the benefits as set forth in the Plan document.



3. Apply for a Line-of-Duty Disability Retirement, subject to the rules and regulations of the City of Memphis Retirement System. The employee must meet the requirements of the benefits sought as set forth in the plan document. Employees may apply for this benefit by contacting the Human Resources Division's Benefits Department

Q18. If my claim is denied, can I appeal?

An employee dissatisfied with a decision denying, in whole or in part, OJI benefits for medical expenses, pay for lost time, or HHL Program eligibility may elect to appeal the matter via procedures outlined in the employee guide.

Q19. Where do I send my appeal?

Please email appeals to ojquestions@memphistn.gov

OJI Permanent Restrictions

Q20. I have OJI permanent restrictions. What should I do next?

Contact the leave department to initiate discussions about possible ADA/AA accommodations. The employee may select/apply for Job Reassignment, Ordinary Disability or Line of Duty Disability.

Q21. If I am medically unable to return to work what are my options?

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1. Apply for **job reassignment** under the Americans with Disabilities Act Amendments Act (ADA/AA).
2. Apply for Long Term Disability Income Plan Benefits and/or Social Security Disability Benefits, if eligible. The employee must meet the requirements of the benefits as set forth in the Plan document.
3. Apply for a Line-of-Duty Disability Retirement, subject to the rules and regulations of the City of Memphis Retirement System. The employee must meet the requirements of the benefits sought as set forth in the plan document. Employees may apply for this benefit by contacting the Human Resources Division's Benefits Department

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FMLA Family Medical Leave Act

Q23. When should I report an FMLA absence? Who should report it?

It is your responsibility to follow the normal City of Memphis absence reporting procedures and to notify your manager of your absence.

Contact MetLife if you are or will be absent from work due to any of the following reasons:

- Your own serious health condition (including pregnancy)
- To care for your newborn child
- The placement of your adopted or foster child
- To provide care for a qualifying family member with a serious health condition
- To care for a covered service member injured in the line of duty
- For qualifying military exigency, allowing family members to take leave to prepare for or deal with issues that arise as a result of a family member being called to serve in the military
- For leave due to your own military service
- For a work-related injury or illness that prevents you from working. For all other absences, please follow the normal City of Memphis absence reporting procedures and notify your department head or manager.

Q24. Who is responsible for notifying The City of Memphis of my FMLA absence?

It is your responsibility to follow the normal City of Memphis absence reporting procedures and to notify your manager of your absence.

Q25. How do I notify MetLife about an FMLA absence/disability?

- Call MetLife at 833-622-0135 or
- MetLife through the My Benefits website at mybenefits.metlife.com or, Fax 1-800-230-9531.
- For ongoing intermittent absence, you are required to notify MetLife within 7 days of missing work.

Q26. What are the Absence Management Service Center's operation hours?

MetLife Customer Service is available from 8:00 a.m. – 11:00 p.m. ET to answer your questions. The toll-free number is 833-622-0135



Q27. When I call to report my absence, what questions will I be asked?

In addition to answering other questions about your absence, you will be asked to provide the following information.

- Employer Name: **City of Memphis**
- Group Policy: 252623
- Social Security Number
- Last day you were at work.
- Reason leave is requested.
- Physician's contact information
(name, address, phone, and fax number)

Q28. As a City of Memphis leader how can I request training for myself or team regarding the OJI process?

Please contact the City of Memphis OJI office: OJIQuestions@memphistn.gov or 901-636-6459

Q29. Will I receive any notification after I initiate an FMLA leave?

After initiating a request for time off, MetLife will send you a letter confirming receipt of your leave request. If you called to request a leave, you will receive a Certification of Health Care Provider form. These forms should be returned to MetLife by the due date indicated in your letter.

Q30. Where do I send the completed forms?

If you are required to submit paperwork, please send the completed forms to:
MetLife

P.O Box 14590

Lexington, KY 40511-4590

You may also fax completed forms to 1-800-230-9531 or
by visiting MyBenefits at mybenefits.metlife.com and upload documents.

Q31. How long does it normally take for an FMLA?

It will take approximately one week to make a claim decision once your completed claim application is received. If we have not decided within one week, you will be notified as to why.



Q32. What are intermittent FMLA and reduced leave schedule?

FMLA may be taken intermittently or on a reduced leave schedule under certain circumstances. **Intermittent leave** is FMLA leave taken in separate blocks of time due to a single qualifying reason. A **reduced leave schedule** decreases an employee's usual number of working hours per workweek or per workday. A reduced leave schedule is a change in the employee's schedule for a period of time, normally from full-time to part-time.

Q33. How do I report an FMLA intermittent absence?

Don't forget to notify your manager and follow your employer's normal absence reporting process.

Q34. How am I paid during FMLA Leave?

FMLA time is unpaid protected leave. You may use your available sick time to supplement your pay during your leave. If you are out of sick time and have previously enrolled into the Short-Term Disability plan offered by The City, you may be eligible for a percentage of your pay through a Short-Term Disability claim. When you file your FMLA leave with MetLife they will automatically review your eligibility for Short Term Disability benefits.

Please note that if you have enough sick time banked to supplement your pay for the entire length of your leave then MetLife will deny your Short-Term Disability claim. If you subsequently run out of time you can simply call MetLife and advise them that you are still out on leave, and they can re-review your eligibility for Short Term Disability Benefits.

Q35. What Happens if I Cannot Return to Work after my FMLA has Exhausted?

When FMLA Benefits are exhausted you may require an accommodation under the Americans with Disabilities Act (ADAAA) to continue to be provided with job protected leave or a worksite accommodation. MetLife is the City's administrator for ADAAA services. When you near exhaustion of the

12 weeks of FMLA leave provided under the law, MetLife will reach out to you and inquire if you require ADAAA assistance to return to work or for additional leave time.

More questions?

Call the Leave of Absence Office at 901-636-6578 or leavecoordinator@memphistn.gov. Or visit the Total Rewards website: <https://totalrewards.memphistn.gov/fmla-adaaa/> for additional information.



ADAAA The Americans with Disabilities Act Amendments Act

Q36. What is the ADAAA?

The Americans with Disabilities Act (ADA) became law in 1990. The ADA is a civil rights law that prohibits discrimination against individuals with disabilities in all areas of public life, including jobs, schools, transportation, and all public and private places that are open to the public. The purpose of the law is to make sure that people with disabilities have the same rights and opportunities as everyone else. The ADA gives civil rights protections to individuals with disabilities similar to those provided to individuals on the basis of race, color, sex, national origin, age, and religion. It guarantees equal opportunity for individuals with disabilities in public accommodations, employment, transportation, state and local government services, and telecommunications. The ADA is divided into five titles (or sections) that relate to different areas of public life. In 2008, the Americans with Disabilities Act Amendments Act (ADAAA) was signed into law and became effective on January 1, 2009. The ADAAA made several significant changes to the definition of “disability.” The changes in the definition of disability in the ADAAA apply to all titles of the ADA, including Title I (employment practices of private employers with 15 or more employees, state and local governments, employment agencies, labor unions, agents of the employer and joint management labor committees); Title II (programs and activities of state and local government entities); and Title III (private entities that are considered places of public accommodation).

Q37. Who is eligible for ADAAA?

A fulltime or part-time employee or applicant who is disabled as defined by the ADAAA, is qualified for the position, and can perform the essential functions of the position with or without a reasonable accommodation.

Q38. What is a disability?

The ADAAA defines a person with a disability as a person who has a physical or mental impairment that substantially limits one or more major life activity. This includes people who have a record of such an impairment, even if they do not currently have a disability. It also includes individuals who do not have a disability but are regarded as having a disability. The ADAAA also makes it unlawful to discriminate against a person based on that person’s association with a person with a disability.

Q39. What is a reasonable accommodation?

A reasonable accommodation is one that enables the employee to complete the essential functions of the job and does not cause an undue hardship to the business. A reasonable accommodation request may be made in the application for employment process, interview process or on the job. A reasonable accommodation process could also be job-protected leave (even beyond the end of FMLA leave); however, there is no need to provide leave should the employee’s health care provider be unwilling to provide an estimated return date, as this does not indicate that the accommodation’s purpose is to assist the employee to return to the essential functions of the job.



Q40. What is an ADAAA job reassignment?

A type of reasonable accommodation that is provided to an employee who, because of a disability, can no longer perform the essential functions of their current position, with or without reasonable accommodation, or when both the employer and the employee voluntarily agree that reassignment is preferable to remaining in the current position with reasonable accommodation.

Q41. What is the interactive process?

A reasonable accommodation is determined by an interactive process between the employer, the employee, and the employee's health care provider. Employees will be asked to provide their health care provider with an accommodation form and their job description. The health care provider can then assist with describing what limitations the employee may have and how the employer could support them in performing the essential functions of the job.

Q42. How do you request an ADAAA accommodation?

Call the Leave of Absence Office at 901-636-6578 or leavecoordinator@memphistn.gov. Or visit the Total Rewards website: <https://totalrewards.memphistn.gov/fmla-adaaa/> for additional information.

LOD Line of Duty

Q43. What is the process if I want to apply for Line of Duty (LOD)?

You will call 901-636-6800 to inquire about Line of Duty application.
The Retirement Team will counsel you on the Line of Duty Disability Retirement

Q44. What happens once I submit my Line of Duty application to the Retirement Office?

Once you completed your application with your attached documents and has been received by the Retirement Office it will be sent to Sedgwick.

Documents needed:

- ✓ Line of Duty Disability Application package
- ✓ Physician statement stating he/she is totally and permanently disable from performing job duties and what the disability is
- ✓ Birth Certificate, Driver License, US Passport or Record of Military Service
- ✓ Preprinted Voided Check

Sedgwick will assign a Case Manager to your case to setup your Individual Medical Examination (IME) with two physicians.



Q45. What happens once I complete the Individual Medical Examination's (IME)?

- ✓ Upon the receipt of reports from the evaluating physician, the Case Manager will submit a copy of the applicant's packet to the Retirement Manager for review.
- ✓ The Retirement Manager will decide if the applicant disability application will go before the Pension Board for approval.
- ✓ If the Retirement Manager approves the applicant's disability application, the application will go before the Pension Board to be voted on for approval.

Q46. What is the next step once the Pension Board approves/denies my Line-of-Duty Disability application?

- ✓ If the Line-of-Duty application is approved by the Pension Board, the Total Rewards Retirement Office will send your division a retirement approval letter.
- ✓ Total Rewards Retirement Office will send you a Line-of-Duty Disability approval letter and estimate of your
- ✓ Your Line-of-Duty Retirement application will be submitted to Pension Payroll for a final calculations and setup on pension payroll.

Q47. How long will it take before I receive my first (1st) pension check?

- ✓ You will receive your first (1st) pension check after you receive your final pay (vacation, sick, etc.).
- ✓ Once your active employee status changes to a retired employee, your payday will be semi-monthly (15th and 30th or 31st).
- ✓ Your first (1st) pension check will be retro back to the date of your retirement.

Q48. What if the Pension Board or Retirement Manger deny my Line-of-Duty Disability Application?

- ✓ You may request a copy of your Line-of-Duty Retirement Application material, including records from the reviewing physicians.
- ✓ You have 14 days from the date of your Line-of-Duty Application to provide materials that are made available to you to notify Total Reward Retirement Office if any of the information contained is incorrect or incomplete.
- ✓ Any corrective notice provided by you will be reviewed and determined if further consideration of the application by the reviewing physicians is necessary.
- ✓ You have 30 calendar days from the date of the denial letter to appeal the denial or you will lose your right to appeal the decision.

More questions?

Call the Retirement Office at 901-636-6800 or retirementquestions@memphistn.gov