



Cancer Presumption FAQs City of MEMPHIS

Q1. What is the Cancer Presumption Law?

Answer: The Cancer Presumption Law presumes that if a Fire Fighter (FF) is diagnosed with certain cancers, the cancer diagnosis was caused by the job, unless the contrary is shown by a board-certified physician oncology. Secondary employment and lifestyle habits may be considered when determining whether the presumption is overcome.

Q2. When did the Cancer Law become effective?

Answer: The Cancer Presumption Law became effective on July 1, 2019.

Q3. What cancers are covered by the law?

Answer: There are six (6) cancers: Skin, Colon, Non-Hodgkin's Lymphoma, and Multiple Myeloma. Effective July 1, 2022, Leukemia and Testicular cancers were added.

Q4. Are these the only cancers with a presumption for City of Memphis Fire Fighters?

Answer: No. The City's OJI policy has extended above and beyond the state law by providing a presumption for these additional cancers: Rectal, Prostate, Thyroid, Lung, Mesothelioma, Stomach, Ovarian, Breast, Cervical and Prostate.

Q5. Are there any eligibility requirement to claim the presumption?

Answer: Yes. The eligibility requirements are: Exposure, Length of Employment and an Annual Cancer Screening.

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support@westclinic.com

Exposure: In order to be eligible to utilize the presumption, a firefighter must have been exposed to heat, smoke, and fumes, or carcinogenic, poisonous, toxic, or chemical substances, while performing the duties of a firefighter in the firefighter's capacity as an employee;

Length of Employment: To be eligible for the presumption, FFs must have completed five (5) or more consecutive years in service; and

Annual Cancer Screenings: A FF shall obtain an initial and annual physical medical examination that includes cancer screenings for the specific types of cancers.



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Q6. Are there any deadlines for the Cancer Presumption?

Answer: Yes. Firefighters must get their baseline cancer screenings completed within a year from your hire date and an annual screening every year after that. New Hires will be offered baseline cancer screenings during the probationary recruit period.

Q7. What cancer screenings should I get?

Answer: The following screenings meet the minimum requirements for the presumption.

- 1) Total Chemistry Panel
- 2) Complete Blood Count (CBC)
- 3) Full Skin Check
- 4) Fecal Occult Blood Test exam for FF under 50. FFs over 50 should receive a colonoscopy
- 5) Thyroid ultrasound (must be performed during annual well exam for \$0 copay)

You should talk with your physician to determine what tests should be performed. Lifesigns will perform these tests during your annual well exam if you chose to go there.

Q8. Is there a form with this information so I can discuss why my physician?

Answer: Yes, 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.

Q9. What if I don't get the form completed by my physician?

Answer: You can still submit proof of your annual cancer screenings with your medical records at the time you file an OJI claim. The CSF is just for your convenience to discuss with your physician and to maintain your cancer screening records.



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Q10. Who is responsible for paying for the cancer screenings?

Answer: The City of Memphis is required to provide the screenings through the health insurance. If you are on City of Memphis Blue Cross Blue Shield insurance, your cancer screenings can be included in your annual well exam with a zero \$0 co-pay.

Q11. I don't have City insurance, how will I get my cancer screening?

Answer: If you are not on the City's health insurance, you can still go to Lifesigns and use your health insurance. If Lifesigns does not accept your insurance, Lifesigns will bill the City for your cancer screenings.

Q12. I already had my annual well exam but didn't get the cancer screenings, what should I do?

Answer: You can go to Lifesigns for the additional cancer screenings for a \$0 copay.

Q13. Can I claim the presumption after I retire?

Answer: Yes. A FF may utilize the presumption for up to five (5) years after the FF's most recent date of exposure.

Q14. I have less than five (5) years on with the Memphis Fire Department as a firefighter, can I still claim the presumption?

Answer: No. The presumption requires five (5) years of active firefighting service. However, you can still file an OJI claim and it will be reviewed for causation without the presumption.

Q15. I have less than five (5) years on with the Memphis Fire Department as a firefighter, but I transferred from another fire department, can I claim the presumption?

Answer: Yes. If you have previous FF service experience with a department recognized by the state fire marshal's office and your FF service is over 5 years.



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Q16. I've been diagnosed with cancer. How do I submit an OJI claim for Cancer?

Answer: Normal OJI reporting process applies:

- Notify your manager or manager on duty.
- The manager or managers on duty report to Sedgwick.
- A claim number is provided and an adjuster is assigned for claims handling.

Q17. Is there a deadline to report a cancer diagnosis as an OJI?

Answer: Yes. You have 30 days from the date of your diagnosis to report it as an OJI.

Q18. If my OJI is approved, what OJI benefits will I receive?

Answer: An employee receives full salary so long as there is medical documentation from the physician of record that it is medically necessary for the employee to remain off work for a maximum of 6 calendar months, plus up to 6 additional calendar months at the Division Director's sole discretion and written authorization, coupled with medical documentation as submitted by the employee's attending physician and/or a physician selected by the City.

Such leave runs concurrently with any FMLA leave for which the employee is eligible.

Q19. Can I file for a Line of Duty (LOD) Pension for my cancer diagnosis?

Answer: Yes, if you been determined by your treating physician that your medical diagnosis reflects permanent restrictions or permanently unable to return to work.

Q20. What criteria is needed for LOD approval?

Answer: Two (2) physicians must determine your cancer was caused by your employment as a FF and that you are permanently and totally disabled by the cancer.



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Informative Information

Medical payments will continue for up to three (3) years for employees who take a Line of Duty Disability Retirement, arising from the employee's injury, exposure or illness.

Leave is available to all City of Memphis employees with the exception of employees:

1. Who work less than 1250 hours during a 12-month period of time and fail to work a total of twelve (12) months for the City of Memphis.
2. The 12-month period in which 12 weeks of leave entitlement occurs is a "rolling" 12-month period measured backward from the date an employee uses any FMLA leave (may not extend back before August 5, 1993).
3. The 12-month period need not be consecutive months for eligibility.
4. Only actual hours worked are counted towards 12-month period.
5. Separate periods of employment in which the break in service is more than Seven (7) years are not used to determine eligibility.

Line of Duty Disability

"The ordinance defines a line of duty disability as

- a physical or mental condition arising as the direct and proximate result of an accident sustained by a participant, and
- the employee must be a participant in the retirement plans, and
- the injury or illness must have occurred while in actual performance of duties for the city at definite time and place, and
- the condition must totally and permanently prevents him or her from engaging in the duties for which he or she was employed by the city, and
- the injury or illness can't be willful negligence or neglect on the employee's part, and
- the determination of the line-of-duty disability of a participant shall be made on medical evidence by at least two qualified physicians."



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Fire FMLA

Q21. When should I report an FMLA absence?

Contact The Standard 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.

Q22. How do I notify The Standard about an FMLA absence/disability?

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

- Call the Absence Management Service Center at 833-878-9034; or
- Login at www.standard.com/absence

Note: First-time users will need to create an account. A step-by-step guide on how to do this is available on www.standard.com/absence under the section of "Need Help" You are required to notify The Standard of any initial absences within 14 days of missing work\

- For ongoing intermittent absence, you are required to notify The Standard within 7 days of missing work



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Q23. What are the Absence Management Service Center's operation hours?

The Absence Management Service Center is available Monday through Friday between 8:00 a.m. and 8:00 p.m. Eastern Time at 1-833-878-9034.

Q24. 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 Number: **640754**
- Social Security Number
- Last day you were at work
- Reason leave is requested
- Physician's contact information
(name, address, phone and fax number)

Q25. Will I receive any notification after I initiate an FMLA leave?

After initiating a request for time off, The Standard 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 The Standard by the due date indicated in your letter.

Q26. Where do I send the completed forms?

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

Standard Insurance Company

Employee Benefits Division

PO Box 3877

Portland OR 97208

Or you may fax completed forms to 866.751.5174.

Q27. 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 made a decision within one week, you will be notified as to why.



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Q28. 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.

Q29. How do I report an FMLA intermittent absence?

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

Q30. 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 The Standard 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 The Standard will deny your Short Term Disability claim. If you subsequently run out of time you can simply call The Standard and advise them that you are still out on leave and they can re-review your eligibility for Short Term Disability Benefits.

Q31. 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) in order to continue to be provided with job protected leave or a worksite accommodation. The Standard is the City's administrator for ADAAA services. When you near exhaustion of the 12 weeks of FMLA leave provided under the law, The Standard 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

Additional Questions? Contact the Memphis Fire OSHA Office at 901.636.5757.

NOTE: This document is not a City policy. In the event of a conflict with City policy or ordinance, the City policy and/or Ordinance will prevail.