

## BULLETIN

NO.: 18-201  
DATE: October 29, 2018  
TO: All Personnel  
FROM: David Picone, Battalion Chief, Health and Safety Officer  
SUBJECT: Cancer Frequently Asked Questions (FAQ book and videos)

A primary goal of your Health and Safety Office is to provide you with the information and tools you need to optimize your total wellness and manage injury and/or illness.

In cooperation with SD City Risk Management, L145 and the SD Fireman's Relief Association the attached book was developed for your reference. Hard copies will be delivered to each station and/or facility for your libraries and quick reference.

- Important to note that although this deals specifically with the workers compensation presumptive clauses for cancer and firefighters, many of the items contained within the FAQ and videos may help answer questions as it pertains to any other Fire-Rescue employee with cancer, other medical conditions and/or pay and leave i.e. FMLA, LTD etc.

The video series below is a roundtable discussion we facilitated between two of our survivors and workers compensation supervisor Jill Degnan. It addresses many of the questions they encountered related to occupational cancer and working with Risk Management.

They are split into six smaller parts for ease of viewing in the stations.

Part 1:

<https://www.youtube.com/watch?v=zt9kAiXL15k&list=PLk2DOINR3CofbYtvJU-TV2BJc6tI9BdoZ&index=6&t=0s>

Part 2:

<https://www.youtube.com/watch?v=-7x4gq1HDio&index=6&list=PLk2DOINR3CofbYtvJU-TV2BJc6tI9BdoZ>

Part 3:

<https://www.youtube.com/watch?v=zBRhKNnVqkE&list=PLk2DOINR3CofbYtvJU-TV2BJc6tI9BdoZ&index=7>

Part 4:

<https://www.youtube.com/watch?v=2t5GkrRmzNA&list=PLk2DOINR3CofbYtvJU-TV2BJc6tI9BdoZ&index=8>

Part 5:

<https://www.youtube.com/watch?v=fJsNigNdiFA&index=9&list=PLk2DOINR3CofbYtvJU-TV2BJc6tI9BdoZ>

Part 6:

<https://www.youtube.com/watch?v=UO--zTLDM14&list=PLk2DOINR3CofbYtvJU-TV2BJc6tI9BdoZ&index=10>

Please contact the Health and Safety Office at [SDFDHealth&Safety@sandiego.gov](mailto:SDFDHealth&Safety@sandiego.gov) with comments or areas of improvement. For all other questions contact HSO/Battalion Chief David Picone at 619.533.4466 or [dpicone@sandiego.gov](mailto:dpicone@sandiego.gov)

**Wellness Resources link:** [“Promoting Safe and Healthy Lives”](#) or call 833-SDFD-HSO password - support



**SAN DIEGO**  
**FIRE-**  
**RESCUE**  
**HEALTH & SAFETY**

**Risk Management**  
**Cancer FAQ Sheet**



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## Occupational Cancer FAQ sheet for Firefighters

*This document serves as a general overview for firefighters in regard to occupationally acquired cancer and processes related to Risk Management and Payroll. This document is not intended to replace any communications with your chain of command, Risk Management, Payroll or guidance received from the Health and Safety Office, Union representative, your personal attorney or Fireman's Relief Association.*

*Workers Compensation laws and regulations change regularly, this document is a snapshot in time based upon Workers Compensation laws and regulations as of February, 2018. The document will be updated at least annually; however, it is incumbent upon the reader to understand that information in this document may have changed since its creation/latest revision.*

**I was just diagnosed with cancer, what do I need to do?  
Is it automatically considered work related?**

California Labor Code 3212.1 provides that cancer is presumed to result from exposure to firefighting and is covered by workers' compensation, although this presumption is disputable and may be challenged with medical evidence. Each cancer case is unique and needs to be evaluated/investigated on its own merits by Risk Management.

**Once you receive a diagnosis please do the following ASAP;**

- Notify your supervisor and submit a Blue Packet
- Call and/or visit Risk Management, Workers' Compensation Division, and speak with the Program Coordinator or Senior Claims Adjuster for the Fire Team to initiate your claim and get your questions answered.
  - **Teri Thompson, Program Coordinator**  
**[thompsons@san Diego.gov](mailto:thompsons@san Diego.gov)**  
**(619)236-6236**
  - **Risk Management**  
**1200 3rd ave, Suite 1000**  
**San Diego, CA. 92101**  
**(619)236-6395**
- Complete ALL paperwork given to you by Risk Management to avoid delay in having your case evaluated.
- Consider calling the Firefighter Cancer Support Network
  - Resources tools and assistance
  - 866-994-FCSN (3276)  
<https://firefightercancersupport.org/>



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- Consider calling your Fireman's Relief Association and getting an SDFD Cancer Mentor assigned to you.
  - Cancer Mentors are SDFD firefighters who have previously traveled the same journey that you are about to begin
  - 10509 San Diego Mission Rd Suite.F  
San Diego, CA 92108  
619-281-0354  
<https://www.sdfra.org/>
- *Organization is essential, keep a log of all your contacts, appointments, mileage, other important information and questions. Promptly fill out and return all documents as directed in order to ensure you get the benefits you are entitled to receive.*

### **What is a Nurse Case Manager?**

A Nurse Case Manager is a nurse assigned to help you navigate your treatment and assist with any needs that arise, ex: prescriptions, home health equipment, transportation to and from appointments, hospitalization discharges and more. You are not required to have the nurse with you when you meet with your doctors. It is voluntary. If you have an attorney representing you, your attorney must approve any Nurse Case Managers before one can be assigned to work directly with you.

### **Should I hire an attorney?**

That is completely up to you. You have the right to retain an attorney and it may prove to be beneficial based on the complexities of your case. Attorneys cannot charge you for a consultation about your rights as a firefighter who has been diagnosed with cancer. However, it is important to note that an attorney is not required for you to receive benefits and/or medical care. When you retain an attorney, Risk Management can only discuss your case with them and not directly with you.

### **How long does Risk Management have to accept my claim?**

The law says it must be accepted or rejected within 90 days from the date the City became aware of your claim. For a diagnosis of cancer, Risk Management attempts to get the appropriate medical documentation as soon as possible.

- You are entitled to receive medical care of up to \$10,000 while Risk Management is obtaining the necessary medical information to make a determination on your claim (also known as a delayed status).



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- If you are off work during the delayed period, the wage replacement benefit (4850 time) is not paid. However, if your claim is accepted at any point, wage replacement benefits will be paid retroactively to the first date of your disability provided the disability dates were certified by your doctor. If you have utilized vacation or annual leave, the 4850 benefits will restore any time used where you were deemed medically disabled from working.
- If your condition is deemed an emergency by your primary treating physician, or by emergency room physicians, Risk Management is required to authorize treatment immediately if requested to do so for up to \$10,000 while Risk Management is obtaining the necessary medical information to make a determination on your claim (also known as a delayed status).
- Any medical treatment benefits which are received during the delayed period are paid for by the City of San Diego. If ultimately a claim is not deemed work related, there is no responsibility of the employee to reimburse any costs paid during the delayed period.

#### **Who treats me when I am diagnosed with cancer?**

- You will be treated within the City's Medical Provider Network (MPN)
- The MPN includes US Health-Works & Sharp Rees Steely and contracted medical specialists outside of those networks.
- *Exception: if you have a pre-designated physician, "physician of record" on file with the Risk Management Department that was pre-designated prior to your diagnosis and claims date, you may seek care through that physician.*

*In the case of cancer, regardless of whether or not you have a pre-designation, if you have already started in a treatment regime outside the City's MPN you may be allowed to continue that treatment with that provider if you so choose. You will not be required to switch to an MPN provider. Cases of skin cancer will be evaluated on a case by case basis.*

#### **Do I have to work and/or take AL during my cancer treatment and recovery?**

- **Generally speaking, no, not if your disability dates are medically certified.**

**Typically, you will be put on 4850 time.**

- 4850 time is the section of the Labor Code that provides police officers, firefighters and other emergency responders with paid time off when ill or injured as a result of work. When using 4850 time you are in what's called *Temporary Total Disability Status*, meaning that you are unable to work in any capacity.
- 4850 time is full pay without loss of salary for up to one year (100% of gross salary) – For firefighters it is equivalent to 2912 hours. Including specialty pay.
- 4850 income is not taxable
- Flex Benefits are not impacted on 4850 time
- You will continue to make retirement contributions and accrue service credits
- You will continue to accrue annual leave



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### What about light duty?

**During your treatment and recovery, you may at some point be deemed well enough to participate in *Light Duty*. Your status if you choose to accept *Light Duty* would change from *Temporary Total Disability Status* to *Light Duty Status*. If you are offered appropriate *Light Duty* but choose not to accept the assignment you will have to use your own *Annual Leave*.**

- Light duty pay includes:
  - An assignment consistent with your doctor's work restrictions
  - Full pay
  - Taxes withheld
  - Continue to accrue *Annual Leave*
  - Retirement contributions and service credit accrual continues
  - No time limits
  - Specialty Pay

### What happens after one year when my 4850 time runs out?

**If you are not recovered enough to return to *light* or *full duty* you are eligible for one additional year of *Total Temporary Disability (TTD) Benefit*.**

- ***Total Temporary Disability Benefit* is different than *Total Temporary Disability Status*.**
  - ***Total Temporary Disability Benefit* is a benefit mandated by the State of California and paid by the City of San Diego to injured workers. This benefit is used after exhausting 4850 time and lasts for up to a maximum 12 months.**
  - ***Total Temporary Disability Status* simply means you are unable to work in any capacity. When using 4850 time or when receiving *Total Temporary Disability Benefits* you are in *Total Temporary Disability Status*.**
- **2/3 your gross pre-tax pay not to exceed the State maximum which changes based on State calculations (based on date of injury; as of 1/1/17 \$1,172.57 weekly; effective on 1/1/18 \$1,215.27 weekly)**
  - For current regulations visit:
    - <http://www.dir.ca.gov/dwc/WCFaqIW.html#5>
    - <http://www.dir.ca.gov/InjuredWorkerGuidebook/Chapter5.pdf>
    - Taxes are not withheld
    - No retirement contributions or service credit accrual
    - Annual Leave is not accrued
    - Flex Benefits are not paid



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***Long-Term Disability after Total Temporary Disability Benefit exhausted or concurrently with Total Temporary Disability Benefit.***

- It is a 12-month benefit, it cannot be extended
  - 70% of your basic biweekly pay
  - If you have dependents with health coverage you are responsible to pay their portion of premiums out of pocket
  - Second year *Long Term Disability*, no income but eligible for COBRA
  - Flex benefits are paid during first 12 months at the "employee only" Flexible Benefit Plan rate
  - Federal and State taxes are withheld
  - No retirement contributions are made while on *Long Term Disability*
  - Savings loans if applicable will continue
  - Service credit accrual stops while on *Long Term Disability*.
  - Do not accrue Annual Leave
  - May be used to extend income additional 12 months in succession after 4850 time and *Total Temporary Disability Benefits* are exhausted if totally disabled as defined by the *Long Term Disability* plan document
  - Total disability means an employee who is medically certified by a licensed physician as unable to perform any gainful employment for which the employee is or becomes reasonably fitted by education, training, or experience
- *Long Term Disability* may be used concurrently with *Temporary Total Disability Benefits* in order to:
    - Bridge the gap between 2/3 *Total Temporary Disability Benefits* and 70% *Long Term Disability* pay

Pay for flex benefits at the "employee only" rate

*It is important to note that Long Term Disability income is 12 months maximum and the clock starts ticking when any portion of that benefit is used*

**At some point during your journey you will likely be deemed “*permanent and stationary*” by your treating physician. This is a legal term utilized in the workers’ compensation process which means that you have reached a medical plateau according to your physician, you are not getting any worse and you are not getting any better.**

- Your physician, a Qualified Medical Examiner or in some cases of attorney represented employees, an Agreed Medical Evaluator may provide a medical report that will be used to rate your disability from 0%-100% taking into account a multitude of factors.



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- Your medical condition and diagnosis
- Date of injury
- Your age
- Occupation
- Disability rating
  - You have the right to disagree with your disability rating and have your case heard in front of a worker's compensation judge
  - You can also ask to have your medical report rated by the State Disability Evaluation Unit
  - Once a disability rating is agreed upon and all other issues such as medical bills, back pay, reimbursements and a number of other potential issues you will be offered an award
- *Stipulations and Awards ("Stips")*
  - Award is paid based on State of California scheduled amounts and they accrue biweekly based on State determined rates
  - If your physician has determined that you will require future medical care, it will be provided for as long as needed
  - Once a Stipulation is entered into, within 5 years from your date of injury, if you experience additional disability, you are eligible to file for additional disability benefits
- *Compromise and Release*
  - Agreements are entered into in limited circumstances and are optional on the part of the City and the employee subject to approval by the Judge
  - One lump-sum payment – full and final settlement of all issues
  - No future medical care, no ability to re-open your case