DEFINITIONS
PROPOSED RULE CHANGES:

5.7.01 – DEFINITIONS

"Aggravation." The term "Aggravation" means a Worsening of an approved service-connected injury/illness or occupational disability that occurs after the Member's condition has been deemed Medically Stationary.

"Attending Physician." The term "Attending Physician" means:

(A) A medical doctor or doctor of osteopathy licensed under ORS 677.100 to 677.228 by the ~~Board of Medical Examiners for the State of Oregon~~ ***Oregon Medical Board, or a podiatric physician or surgeon licensed under ORS 677.805 to 677.840 by the Oregon Medical Board, an oral and maxillofacial surgeon licensed by the Oregon Board of Dentistry*** or a similarly licensed doctor in any country or in any state, territory or possession of the United States, or

(B) For a period of 30 days from the first visit on the initial Claim or for 12 visits, whichever first occurs, a doctor or physician licensed by the State Board of Chiropractic Examiners for the State of Oregon or a similarly licensed doctor or physician in any country or in any state, territory, or possession of the United States. All Members drawing disability benefits shall be examined at least once during each twelve-month period by the Member's identified physician or a physician appointed by the Director, unless otherwise determined by the Director.

"Base Pay." The term "Base Pay" means the ~~b~~***B***ase ~~p~~***P***ay of the FPDR Two or FPDR Three Member's position in the Bureau of Fire or Police, including premium pay but excluding overtime and payments for unused vacation**,** sick or other leave. When a Member is paid overtime for part of his or her regular work schedule as required by Fair Labor Standards Act provisions, the straight-time portion of the overtime hours in the Member's regular work schedule shall be included in Base Pay.

"Base Pay in Effect at Disability." The term "Base Pay in Effect at Disability" means the Member's base pay amount at the time the disability payment is due.

"Bi-weekly Disability Benefits." The term "Bi-weekly" Disability Benefits" means disability benefits payable on the same schedule as the Member's regular payroll on approved service-connected and occupational disability Claims during a member's first year of receiving disability benefits.

"Claim." The term "Claim" means a written request to FPDR for a retirement, disability or death benefit and may be filed by an active ~~m~~***M***ember, his/her representative or legal beneficiary, or surviving spouse or other legal beneficiary of a deceased ~~m~~***Member***. This term may be used synonymously with the term "application."

"Date of Disability." The term "Date of Disability" means the date that the Member***'s Attending Physician establishes that the Member*** is first unable to perform the Member'

required duties as a result of ***a service-connected*** injury/illness ***or occupational disability*** that has been determined to arise out of and in the course of the Member's employment in the Bureau of Police or Fire.

"Director." The term "Director" where used in these Administrative Rules shall mean the Fund Director and/or Fund Administrator or his or her designee.

"Documented Absence." The term "Documented Absence" means documentation of the time missed from a scheduled work shift submitted to the Director demonstrating that the Member was not paid by the Bureau of Fire or Police for that time.

"Full-Time Work." For the purpose of Other Employment, the term "Full-Time Work" means working an average of at least 36 hours per week or the maximum work hours documented in the permanent restriction(s) placed by the Attending Physician.

"Independent Medical Examination (IME)." The term "Independent Medical Examination" means an examination by one or more licensed medical providers in order to provide an opinion of findings in connection with a service-connected injury/illness or an occupational disability Claim. A Physical Capacity Evaluation (PCE) or a Work Capacities Evaluation (WCE) is considered an "IME" under these rules.

"Interim Disability Benefits." The term "Interim Disability Benefits" means an amount that may be payable to a Member for lost time from work prior to the compensability determination or withdrawal of his/her application for service-connected ***injury/illness*** or occupational disability benefits.

"Medically Stationary." The term "Medically Stationary" means that no further material improvement can reasonably be expected from medical treatment or the passage of time.

"Monthly Disability Benefits." The term "Monthly Disability Benefits" means benefits payable once per month on approved service-connected and occupational disability claims after a ~~m~~***Member's*** first year of receiving disability benefits.

"Original Injury." The term "Original Injury" means the period from the first occasion of medical treatment or disability resulting from a service-connected ***injury/illness*** or occupational disability through the date the member first reaches a medically stationary status.

"Other Employment." The term "Other Employment" means employment with any person, firm, company, corporation, government agency, municipality or Self-Employment, and does not include employment as an Active Member of the Bureau of Fire or Bureau of Police, or work performed as part of an approved Transitional Duty Return to Work Program in accordance with Administrative Rule 5.10.03.

"Pended." The term "Pended" means the 60-90 day period following FPDR's receipt of a complete application for benefits on an original Claim or for a Recurrence Claim during which FPDR is evaluating the Claim to determine if the injury or illness arose out of and in the course of the Member's employment with the Bureau of Fire or Police.

"Preponderance of the Evidence." The term "Preponderance of the Evidence" means the greater weight of the evidence.

"Primary Physician." See "Attending Physician."

"Proximate Cause." The term "Proximate Cause" means a cause that directly produces an event and without which the event would not have occurred.

"Recurrence." An Aggravation of a service-connected injury/illness or occupational disability that requires Claim re-opening for additional disability benefits and/or medical benefits.

"Self-Employment." The term "Self-Employment" means the Member is working as:

- ***a sole proprietor who conducts a trade or business;***
- ***an independent contractor;***
- ***a member of a partnership that conducts a trade or business; or***
- ***otherwise is in business for himself or herself***

Self-Employment is considered Full-Time Work only when the Member is working an average of at least 36 hours per week or the maximum work hours documented in the permanent restriction(s) placed by the Attending Physician.

"Significant Factor." The term a "Significant Factor" means an important, proximate cause.

"Specialty Physician." The term "Specialty Physician" means a licensed physician who qualifies as an Attending Physician who provides evaluation, diagnosis or temporary specialized treatment at the request of the Member's "Attending Physician" on an approved Claim.

"Substantial Gainful Activity." The term "Substantial Gainful Activity" means the Member is qualified, physically and by education and experience, to pursue employment with earnings equal to or exceeding one-third of the Member's rate of Base Pay ~~at disability~~ ***in Effect at Disability.***

"Suspension of Benefits." The term "Suspension of Benefits" means ***the payment of*** disability benefits are stopped by the Director for the period of suspension when the Member has failed to comply with the provisions of Chapter 5 of the City Charter, or ~~with a particular FPDR~~ Administrative Rule***s*** ~~provision~~.

"Wages Earned in Other Employment." The term "Wages Earned in Other Employment" includes:

(a) the gross salary, overtime pay, fees, commissions, or other remuneration received by a Member for services rendered as an employee to an employer in Other Employment other than the Bureau of Fire or Bureau of Police. The term Wages Earned in Other Employment also includes;

(b) any salary, fees, commissions, profits or other remuneration that the Member receives from his or her Self-Employment in a profession, trade or business; and

(c) any rental income, if the Member owns a rental(s) and the IRS requires that the rental income be reported as Self-Employment income, your rental income is considered "outside wages" and is subject to the wage offset.

The term "Wages Earned in Other Employment" does not include income from investments such as interest, dividends and capital gains.

"Worsening" The term "Worsening" means objective findings indicating a ***deterioration*** ~~worsening~~ of the approved service-connected injury/illness or occupational disability based on expert medical opinion or an expert medical opinion explaining why the Member's symptoms indicate a worsening of the approved service-connected injury/illness or occupational disability.

"Years of Service." The term "Years of Service" of a FPDR Two or FPDR Three Member shall mean the service credit for FPDR Two retirement benefits as defined in Charter Section 5-302 and these Administrative Rules.

5.8.01 – DEFINITIONS

"Attending Physician." The term "Attending Physician" means:

(A) A medical doctor or doctor of osteopathy licensed under ***ORS 677.100 to 677.228 by the ~~Board of Medical Examiners for the State of Oregon~~ Oregon Medical Board, or a podiatric physician or surgeon licensed under ORS 677.805 to 677.840 by the Oregon Medical Board, an oral and maxillofacial surgeon licensed by the Oregon Board of Dentistry*** or a similarly licensed doctor in any country or in any state, territory or possession of the United States, or

(B) For a period of 30 days from the first visit on the initial Claim or for 12 visits, whichever first occurs, a doctor or physician licensed by the State Board of Chiropractic Examiners for the State of Oregon or a similarly licensed doctor or physician in any country or in any state, territory, or possession of the United States.

"Base Pay." The term "Base Pay" means the ~~b~~***B***ase ~~p~~***P***ay of the FPDR Two or FPDR Three Member's position in the Bureau of Fire or Police, including premium pay but excluding overtime and payments for unused vacation, sick or other leave. When a Member is paid overtime for part of his or her regular work schedule as required by Fair Labor Standards Act provisions, the straight-time portion of the overtime hours in the Member's regular work schedule shall be included in Base Pay.

"Base Pay in Effect at Disability." The term "Base Pay in Effect at Disability" means the Member's Base Pay amount at the time the disability payment is due.

"Claim." The term "Claim" means a written request to FPDR for a retirement, disability or death benefit and may be filed by an active ~~m~~***M***ember, his/her representative or legal beneficiary, or surviving spouse or other legal beneficiary of a deceased ~~m~~***Member***. This term may be used synonymously with the term "application."

"Date of Disability." The term "Date of Disability" means the date that the Member'***s Attending Physician establishes that the Member*** is first unable to perform the Member' required duties as a result of ***a service-connected*** injury***/***illness ***or occupational disability*** that has been determined to arise out of and in the course of the Member's employment in the Bureau of Police or Fire.

"Director." The term "Director" where used in these Administrative Rules shall mean the Fund Director and/or Fund Administrator or his or her designee.

"Documented Absence." The term "Documented Absence" means documentation of the time missed from a scheduled work shift submitted to the Director demonstrating that the Member was not paid by the Bureau of Fire or Police for that time.

"Full-Time Work." For the purpose of Other Employment, the term "Full-Time Work" means working an average of at least 36 hours per week or the maximum work hours documented in the permanent restriction(s) placed by the Attending Physician.

"Independent Medical Examination (IME)." The term "Independent Medical Examination" means an examination by one or more licensed medical providers in order to provide an opinion of findings in connection with a service-connected injury/illness or an occupational disability Claim. A Physical Capacity Evaluation (PCE) or a Work Capacities Evaluation (WCE) is considered an "IME" under these rules.

"Monthly Disability Benefits." The term "Monthly Disability Benefits" means benefits payable once per month on approved ~~non service~~***nonservice***-connected disability Claims.

"Other Employment." The term "Other Employment" means employment with any person, firm, company, corporation, government agency, municipality or Self-Employment, and does not include employment as an Active Member of the Bureau of Fire or Bureau of Police, or work performed as part of an approved Transitional Duty Return to Work Program in accordance with Administrative Rule 5.10.03.

"Pended." The term "Pended" means the 60-90 day period following FPDR's receipt of a complete application for benefits on an original Claim or for a Recurrence Claim during which FPDR is evaluating the Claim to determine if the injury or illness arose out of and in the course of the Member's employment with the Bureau of Fire or Police.

"Self-Employment." The term "Self-Employment" means the Member is working as:

- ***a sole proprietor who conducts a trade or business;***
- ***an independent contractor;***
- ***a member of a partnership that conducts a trade or business; or***
- ***otherwise is in business for himself or herself***

Self-Employment is considered Full-Time Work only when the Member is working an average of at least 36 hours per week or the maximum work hours documented in the permanent restriction(s) placed by the Attending Physician.

"Specialty Physician." The term "Specialty Physician" means a licensed physician who qualifies as an Attending Physician who provides evaluation, diagnosis or temporary specialized treatment at the request of the Member's "Attending Physician" on an approved Claim.

"Substantial Gainful Activity." The term "Substantial Gainful Activity" means the Member is qualified, physically and by education and experience, to pursue employment with earnings equal to or exceeding one-third of the Member's rate of Base Pay ~~at disability~~ ***in Effect at Disability.***

"Suspension of Benefits." The term "Suspension of Benefits" means ***the payment of*** disability benefits are stopped by the Director for the period of suspension when the Member has failed to comply with the provisions of Chapter 5 of the City Charter, or ~~with a particular FPDR~~ Administrative Rule***s*** ~~provision~~.

"Wages Earned in Other Employment." The term "Wages Earned in Other Employment" includes:

(a) the gross salary, overtime pay, fees, commissions, or other remuneration received by a Member for services rendered as an employee to an employer in Other Employment other than the Bureau of Fire or Bureau of Police. The term Wages Earned in Other Employment also includes;

(b) any salary, fees, commissions, profits or other remuneration that the Member receives from his or her Self-Employment in a profession, trade or business; and

(c) any rental income, if the Member owns a rental(s) and the IRS requires that the rental income be reported as Self-Employment income, your rental income is considered "outside wages" and is subject to the wage offset.

The term "Wages Earned in Other Employment" does not include income from investments such as interest, dividends and capital gains.

"Years of Service." The term "Years of Service" of a FPDR Two or FPDR Three Member shall mean the service credit for FPDR Two retirement benefits as defined in Charter Section 5-302 and these Administrative Rules.

5.9.01 – DEFINITIONS

"Aggravation." The term "Aggravation" means a Worsening of an approved service-connected injury/illness or occupational disability that occurs after the Member's condition has been deemed Medically Stationary.

"Ancillary Services." The term "Ancillary Services" means services that supplement the care provided by the Member's physician or other authorized health care provider (e.g., physical therapy, occupational therapy, etc.).

"Attending Physician." The term "Attending Physician" means:

(A) A medical doctor or doctor of osteopathy licensed under ORS 677.100 to 677.228 by the ~~Board of Medical Examiners for the State of Oregon~~ ***Oregon Medical Board, or a podiatric physician or surgeon licensed under ORS 677.805 to 677.840 by the Oregon Medical Board, an oral and maxillofacial surgeon licensed by the Oregon Board of Dentistry*** or a similarly licensed doctor in any country or in any state, territory or possession of the United States, or

(B) For a period of 30 days from the first visit on the initial Claim or for 12 visits, whichever first occurs, a doctor or physician licensed by the State Board of Chiropractic Examiners for the State of Oregon or a similarly licensed doctor or physician in any country or in any state, territory, or possession of the United States. All Members drawing disability benefits shall be examined at least once during each twelve-month period by the Member's identified physician or a physician appointed by the Director, unless otherwise determined by the Director.

"Chart Note." The term "Chart Note" means a chronological documentation in ~~an individual's~~ ***a Member's*** medical record, and includes subjective and objective findings, diagnosis, treatment rendered and proposed, status, and recovery and return to work objectives.

"Claim." The term "Claim" means a written request to FPDR for a retirement, disability or death benefit and may be filed by an active ~~m~~***M***ember, his/her representative or legal beneficiary, or surviving spouse or other legal beneficiary of a deceased ~~m~~***Member***. This term may be used synonymously with the term "application."

"Curative Care." The term "Curative Care" means Medical Services required to diagnose, heal or permanently relieve or eliminate a medical condition.

~~"Current Procedural Terminology." The term "Current Procedural Terminology or "CPT" ® means the codes and terminology most recently published by the American Medical Association.~~

"Customary Fee." The term "Customary Fee" means a fee that falls within the range of fees normally charged in Oregon for a given service.

"Date of Disability." The term "Date of Disability" means the date that the Member's ***Attending P***~~p~~hysician ***establishes that the Member is first*** ~~determines that the Member is~~

unable to perform the Member's required duties ***as a result of a service-connected injury/illness or occupational disability that has been determined to arise out of and in the course of the Member's employment in the Bureau of Police or Fire.***

"Director." The term "Director" where used in these Administrative Rules shall mean the Fund Director and/or Fund Administrator or his or her designee.

"Elective Surgery." The term "Elective Surgery" is surgery which may be necessary in the process of recovery from an injury or illness, but need not be done as an emergency to preserve life, function or health.

~~"Home Health Care." The term "Home Health Care" means medically necessary medical and medically related services provided in the Member's home environment. These services may include professional nursing care, medical administration, or personal hygiene, or assistance with mobility and transportation.~~

"Independent Medical Examination (IME)." ***The term "Independent Medical Examination" means*** ~~A~~***an*** examination by one or more licensed medical providers in order to provide an opinion of findings in connection with a~~n~~ ***service-connected*** injury/illness or ***an*** occupational disability Claim. A Physical Capaci~~ties~~***y*** Evaluation (PCE) or a Work Capacities Evaluation (WCE) is considered an "IME" under these rules.

~~"Medical Evidence." The term "Medical Evidence" means expert written testimony, statements and opinions; sworn affidavits and testimony of medical experts; records, reports, documents, diagnostic test results authored, produced, generated, or verified by medical professionals; and medical research and reference material utilized, produced, or verified by medical professionals who are physicians or medical record reviewers in the particular case under consideration.~~

"Medical Service." The term "Medical Service" means any medical treatment, including:

(A) Surgery
(B) Diagnostic procedures
(C) Chiropractic
(D) Dental
(E) In-patient and Out-patient hospitalization
(F) Professional nursing
(G) Ambulance transport
(H) Prescription drugs
(I) Medicine
(J) Durable medical equipment
(K) Crutches
(L) Braces and supports
(M) Prosthetic appliances
(N) Physical Restorative Services

“Medical Treatment.” The term “Medical Treatment” means the management and care of a Member by a licensed medical provider for the purpose of combating disease, injury, or disorder.

"Medically Stationary." The term "Medically Stationary" means that no further material improvement can reasonably be expected from medical treatment or the passage of time**.**

“Nurse Case Manager.” A licensed nurse assigned by the Director to follow and monitor the progress of recovery of an injury/illness or occupational Claim.

“Original Injury.” The term “Original Injury” means the period from the first occasion of medical treatment or disability resulting from a service-connected ***injury/illness*** or occupational disability through the date the member reaches a Medically Stationary status.

“Palliative Care.” The term “Palliative Care” means post-Medically Stationary Medical Services required to reduce or temporarily moderate the intensity of an otherwise stable condition. It does not include those Medical Services needed to diagnose, heal, or permanently alleviate a medical condition.

“Physical Capacity Evaluation.” The term “Physical Capacity Evaluation” means an objective, directly observed, measurement of a Member’s ability to perform a variety of physical tasks combined with subjective analyses of abilities by worker and evaluator. Physical tolerance screening, Blankenship’s Functional Evaluation, and Functional Capacity Assessment will be considered to have the same meaning as Physician Capacity Evaluation.

“Physical Restorative Services.” The term “Physical Restorative Services means services prescribed by the Member’s physician that are designed to restore and maintain the Member to the highest functional ability consistent with the Member’s condition.

“Preponderance of the Evidence.” The term “Preponderance of the Evidence” means the greater weight of the evidence.

~~“Primary Physician.” See “Attending Physician.”~~

“Proximate Cause.” The term “Proximate Cause” means a cause that directly produces an event and without which the event would not have occurred.

“Recurrence.” An Aggravation of a service-connected injury/illness or occupational disability that requires Claim re-opening for additional disability benefits and/or medical benefits after the Member has reached Medically Stationary status with respect to the approved service-connected injury/illness or occupational disability.

“Significant Factor.” The term a “Significant Factor” means an important, Proximate Cause.
“Specialty Physician.” The term “Specialty Physician” means a licensed physician who qualifies as an Attending Physician who provides evaluation, diagnosis or temporary specialized treatment at the request of the Member’s “Attending Physician” on an approved Claim.

"Work Capacity Evaluation." The term "Work Capacity Evaluation" means a physical capacity evaluation with special emphasis on the ability to perform a variety of vocationally oriented tasks based on specific job demands. Work Tolerance Screening will be considered to have the same meaning as Work Capacity Evaluations.

"Worsening" The term "Worsening" means objective findings indicating a ***deterioration*** ~~worsening~~ of the approved service-connected injury/illness or occupational disability based on expert medical opinion or an expert medical opinion explaining why the Member's symptoms indicate a ~~worsening~~ ***deterioration*** of the approved service-connected injury/illness or occupational disability.

5.10.02 – <u>DEFINITIONS</u>

"Attending Physician." The term "Attending Physician" means:

(A) A medical doctor or doctor of osteopathy licensed under ORS 677.100 to 677.228 by the Oregon Medical Board, or a podiatric physician or surgeon licensed under ORS 677.805 to 677.840 by the Oregon Medical Board, an oral and maxillofacial surgeon licensed by the Oregon Board of Dentistry or a similarly licensed doctor in any country or in any state, territory or possession of the United States, or

(B) For a period of 30 days from the first visit on the initial Claim or for 12 visits, whichever first occurs, a doctor or physician licensed by the State Board of Chiropractic Examiners for the State of Oregon or a similarly licensed doctor or physician in any country or in any state, territory, or possession of the United States. All Members drawing disability benefits shall be examined at least once during each twelve-month period by the Member's identified physician or a physician appointed by the Director, unless otherwise determined by the Director.

"Base Pay." The term "Base Pay" means the Base Pay of the FPDR Two or FPDR Three Member's position in the Bureau of Fire or Police, including premium pay but excluding overtime and payments for unused vacation, sick or other leave. When a Member is paid overtime for part of his or her regular work schedule as required by Fair Labor Standards Act provisions, the straight-time portion of the overtime hours in the Member's regular work schedule shall be included in Base Pay.

"Base Pay at Disability." The term "Base Pay at Disability" means the Member's base pay amount at the time the disability payment is due.

"Date of Disability." The term "Date of Disability" means the date that the Member'***s Attending Physician establishes that the Member*** is first unable to perform the Member' required duties as a result of ***a service-connected*** injury~~,~~/illness ***or occupational disability*** that has been determined to arise out of and in the course of the Member's employment in the Bureau of Police or Fire.

"Full-Time Work." For the purpose of Other Employment, the term "Full-Time Work" means working an average of at least 36 hours per week or the maximum work hours documented in the permanent restriction(s) placed by the Attending Physician.

"Original Injury." The term "Original Injury" means the period from the first occasion of medical treatment or disability resulting from a service-connected ***injury/illness*** or occupational disability through the date the member first reaches a medically stationary status.

"Other Employment." The term "Other Employment" means employment with any person, firm, company, corporation, government agency, municipality or Self-Employment, and does not include employment as an Active Member of the Bureau of

Fire or Bureau of Police, or work performed as part of an approved Transitional Duty Return to Work Program in accordance with Administrative Rule 5.10.03.

"Pursue Other Employment." "Pursue Other Employment" means: an active, serious, and continuing effort to seek ~~f~~***F***ull-~~t~~***T***ime ~~w~~***W***ork each week that the Member claims benefits.

"Substantial Gainful Activity." The term "Substantial Gainful Activity" means the Member is qualified, physically and by education and experience, to pursue employment with earnings equal to or exceeding one-third of the Member's rate of Base ~~at Disability~~ ***in Effect at Disability.***

"Transferable Skills." The term "Transferable Skills" means the knowledge, skills and abilities demonstrated in past training and employment which make a Member employable at work, with a new employer, with earnings equal to or exceeding one-third of the Member's rate of Base Pay at Disability.

"Transitional Duty." The term "Transitional Duty" means available tasks that allow a disabled member to return to work at an assignment that is less physically/mentally demanding than the member's regular work for a limited period of time. Also known as "Limited Duty."

"Vocational Assessment." The term "Vocational Assessment" means an evaluation, performed by a certified vocational counselor, consisting of one or more tests conducted to determine if a Member has reached a level of Substantial Gainful Activity.

"Vocational Rehabilitation." The term "Vocational Rehabilitation" means any services, goods, or allowance intended to support the Member's return to work efforts. A process initiated as early as possible for a Member who has been disabled and may require a different job or career as a result. May include Vocational Assessment, labor market surveys, developing alternative work plans, retraining, and assistance with job-seeking skills.