OREGON ADMINISTRATIVE RULE PUBLIC EMPLOYEES RETIREMENT BOARD CHAPTER 459 DIVISION 015 – DISABILITY RETIREMENT ALLOWANCES

459-015-0010

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1	457-013-0010
2	Criteria for Granting and Denying Disability Retirement Allowances
3	(1) PERS shall determine eligibility for disability retirement allowances based on an
4	applicant's capacity and qualifications as set forth below.
5	(2) Medical documentation is required by PERS. Each disability retirement applicant
6	shall supply any treating or consulting physician's examination report or other
7	medical information requested by PERS. PERS may base its determination on
8	either a treating or consulting physician's medical examination report or have the
9	applicant examined by one or more physicians selected by PERS, or both.
10	(3) All claims of a disability must be supported by at least one physician's report,
11	resulting from a medical examination, documenting how the injury or disease
12	incapacitates the member. A physician assistant's examination report will be
13	accepted as a physician's report when signed by a supervising physician who has
14	examined the member.
15	(4) In addition, a disability retirement applicant shall be required to furnish the
16	following:
17	(a) For claims of mental or emotional disorder, at least one report by a
18	treating or consulting psychiatrist or doctor of psychology;
19	(b) For claims of orthopedic injury or disease, at least one report of a treating
20	or consulting orthopedic or physical medicine and rehabilitation specialist;
21	(c) For claims of neurological or neurosurgical injury or disease, at least one
22	report of a treating or consulting neurologist or neurosurgeon;
23	(d) For claims of fibromyalgia, at least one documented diagnosis by a
24	rheumatologist, and at least one report of a treating or consulting
25	rheumatologist or physical medicine and rehabilitation specialist; and
26	(e) Any other specialized physician's report that PERS deems necessary.
27	(5) To demonstrate that [he or she] the member who was employed as other than a
28	police officer or firefighter is unable to perform any work for which qualified or

the member who was employed as a police officer or firefighter as defined in

1	ORS 238.005 is unable to perform the work the member performed at the
2	time the member became disabled, as defined in OAR 459-015-0001[(1)], the
3	applicant shall document how the injury or disease incapacitates the applicant.
4	The standard is subjective (that is, whether the applicant is actually incapacitated)
5	not objective (that is, whether a "normal" member would have been incapacitated
6	by the same events).
7	(a) For members who were employed as other than a police officer or
8	firefighter, [In] in determining what work for which a member is
9	qualified, the following factors shall be considered:
10	(A) Previous employment experience;
11	(B) Formal education;
12	(C) Formal training;
13	(D) Transferable skills;
14	(E) Age; and
15	(F) Physical or mental impairment.
16	(b) For members who were employed as a police officer or firefighter, in
17	determining if the member is able to perform the work the member
18	performed at the time they became disabled, the following factors
19	shall be considered:
20	(A) The position description for the job the member held at the
21	time of their injury or illness;
22	(B) Physical or mental impairment; and
23	(C) Any other relevant personnel documentation.
24	[(b)] (c) In determining what work for which a member is qualified or to
25	establish if a police officer or firefighter member can continue to perform
26	work the member performed at the time the member became disabled, PERS
27	may request, at PERS' expense, a vocational evaluation be done by a vocational
28	consultant who is fully certified as set forth in OAR 459-015-0001(2).
29	[(c)] (d) For members who were employed as other than a police officer or
30	<u>firefighter</u> , [The] the inability of the applicant to perform the duties of [his or

1	her] their last job, in itself, does not satisfy the "unable to perform any work
2	for which qualified" criterion.
3	[(d)] (e) An applicant's receipt of weekly unemployment insurance benefits after
4	the date of disability shall create a rebuttable presumption that the member was
5	able, available, and willing to perform any work for which qualified during the
6	week for which the applicant received the benefits.
7	(6) When there is a dispute among medical experts, more weight will be given to
8	those medical opinions that are both well-reasoned and based on complete
9	information.
10	(7) The Board may deny any application or discontinue any disability retirement
11	allowance if an applicant:
12	(a) Refuses to submit to an independent medical or vocational examination; or
13	(b) Refuses to submit to any medical examination or supply a completed
14	application or review form.
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