

Retirement System

Retirement Board

Chapter 15: Disability Retirement

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CHAPTER 15

DISABILITY RETIREMENT

Section 1. Eligibility Determination.

(a) Any Member may contact the System to determine whether they are eligible to apply for disability retirement benefits, and shall be evaluated in accordance with the provisions of the applicable plan to determine eligibility using current employment information.

(b) An eligibility determination of an applicant shall be made without regard to sex, race, age, creed, color, or national origin.

(c) No Member is entitled to a disability benefit if the disability is the direct or indirect result of an intentional self-inflicted injury, while sane or insane; the commission of, or attempt to commit a felony or other illegal act; a substance abuse condition, unless a Member is receiving ongoing treatment which prevents the Member from working; bodily injury, mental illness, disease or condition which pre-existed membership in the System.

(d) The System shall deliver to any Member determined to be eligible to apply for disability retirement benefits disability claim forms and instructions.

Section 2. Application Procedure.

(a) All applicants shall be informed in writing of their rights at the time of application. Such rights include, but are not limited to, the following:

(i) The client's medical records are confidential;

(ii) An explanation of the methods of obtaining and releasing client information, including the necessity of client consent;

(iii) The availability of and methods of requesting administrative review and a fair hearing;

(b) Any Member determined to be eligible to apply for disability retirement benefits pursuant to Section 1 of this Chapter, must complete and sign the disability application and all related release forms and return the completed application to the System or its designee within one (1) year of the date the Member asserts the disability rendered the Member unable to perform the occupation for which he or she is reasonably suited by training and experience.

Section 3. Evaluation Procedure.

(a) Upon receipt of a completed application, the System shall contact the employer for proof of employment, official job title and position description.

(b) The System or its designee shall conduct a comprehensive assessment of an application filed by a Disability Applicant. Upon conclusion of the assessment, the Disability Administrator shall render an initial System decision regarding the disability. The Disability Administrator may require the applicant to submit further evidence of the disability and may require the applicant to undergo subsequent examinations or tests, medical or otherwise, deemed necessary and relevant to making a determination. The System shall pay the cost of any additional examination or test required pursuant to this subsection.

(c) The Disability Administrator shall notify the Disability Applicant of the decision by certified mail, return receipt requested, and in accordance with the Wyoming Administrative Procedures Act.

(d) The Disability Administrator may require a Member awarded disability benefits to obtain an evaluation from the Wyoming Department of Health, Division of Vocational Rehabilitation. Upon a recommendation from the Division, the Disability Administrator may require the Member to enter into a program of rehabilitation and provide the Disability Administrator with progress reports at such intervals as specified.

Section 4. Review of Disability Status.

(a) The following procedure shall be used to evaluate the status of each recipient of disability retirement benefits from the System and to establish whether further action is required:

(i) The System or its designee shall keep on file a record of each disability recipient's date of birth, date of disability, address, age, medical background and type and amount of benefit;

(ii) Unless otherwise noted in the disability award letter, the System shall require, at a minimum, disability award recipients to provide annual updates of their medical records to the System or its designee from the recipient's primary physician. The System or its designee shall conduct annual reviews of each disability benefit recipient's file to establish whether or not the recipient has the potential for recovery, what type of physical review is necessary and what process is needed for that review;

(iii) The System may require the recipient to submit to a functional capacity evaluation, physical examination, or other examination performed by a qualified evaluator as selected by the System at the System's expense;

(iv) If the result of any procedure specified in this section indicates that the recipient is no longer disabled, all records of the evaluation and those of the original disability discovery shall be sent to the Disability Administrator for review and advisement;

(v) Not less than quarterly, the System shall notify the Board of all reviews commenced and completed during the immediately preceding quarter and the outcome of each such review.

(b) In addition to the disability reviews specified in subsection (a) of this section, any disability benefit recipient who has been granted a disability conditioned upon further review at a future date shall be scheduled for review by the System or its designee in accordance with the condition specified in the disability award.

(c) No review shall be conducted of any disability recipient who has attained age sixty (60) years old (or normal retirement age, whichever is later), or who, by virtue of the medical record, is deemed by the Disability Administrator to have a terminal condition.

Section 5. Cancellation of Benefit.

(a) If the review of a disability results in cancellation of a disability retirement benefit, the recipient shall be informed by certified mail, return receipt requested, of the reason for the cancellation and the options available for appeal. The benefit shall be canceled beginning the month following the determination.

(b) If a benefit recipient fails or refuses to either provide required medical information or submit to any procedure specified in this Chapter within sixty (60) days from the date the System or its designee requests such information or procedure, the recipient's benefit shall be canceled beginning the month following the 60 day period, and the recipient shall be notified of the cancellation by certified mail, return receipt requested.