LAW ENFORCEMENT OFFICERS AND FIRE FIGHTERS DISABILITY BENEFITS TRUST FUND POLICIES AND PROCEDURES

I. PURPOSE

The Law Enforcement Officers and Fire Fighters Disability Benefits Trust Fund (herein referred to as "the Fund") was created by the Mississippi Legislature to provide disability benefits to law enforcement officers and fire fighters injured in the line of duty. These benefits shall be payable for the period of time the covered individual is physically unable to perform the duties of his or her employment [not to exceed twelve (12) total payments for any one (1) injury].

The Fund originated at the Mississippi Department of Public Safety and came under the purview of the Mississippi Attorney General's Office on July 1, 2006, pursuant to Section 45-2-21, Mississippi Code Annotated (1972).

II. DEFINITIONS

"Law enforcement officer" means any lawfully sworn officer or employee of the state or any political subdivision of the state whose duties require the officer or employee to investigate, pursue, apprehend, arrest, transport or maintain custody of persons who are charged with, suspected of committing, or convicted of a crime.

"Fire fighter" means an individual who is trained for the prevention and control of loss of life and property from fire or other emergencies, who is assigned to fire-fighting activity, and is required to respond to alarms and perform emergency actions at the location of a fire, hazardous materials or other emergency incident.

"Covered individual" means a law enforcement officer or fire fighter (as defined above) while actively engaged in protecting the lives and property of the citizens of this state when employed by an employer as defined below. Employees of independent contractors are not included in this definition.

"Employer" means a state board, commission, department, division, bureau, or agency, or a county, municipality or other political subdivision of the state, which employs, appoints or otherwise engages the services of covered individuals.

III. ELIGIBILITY

Any actively employed law enforcement officer or fire fighter who is accidentally or intentionally injured in the line of duty as the direct result of a single incident is eligible to receive benefits.

III. ELIGIBILITY (continued)

The individual must be employed by a state board, commission, department, division, bureau, or agency, or a county, municipality, or other political subdivision of the state. Employees of independent contractors are not eligible.

IV. EXCLUSIONS

Chronic or repetitive injury is not covered.

Section 45-2-21, Mississippi Code Annotated (1972) states, "Compensation under this section shall not be awarded where a penal violation committed by the covered individual contributed to the disability or the injury was intentionally self-inflicted."

V. EXEMPTION FROM CREDITORS

"Payments made from the Law Enforcement Officers and Fire Fighters Disability Benefits Trust Fund are exempt from the claims and demands of creditors of the covered individual" per Section 45-2-21, Mississippi Code Annotated (1972).

VI. OBTAINING PROGRAM INFORMATION

Applications are included in these policies and procedures as **EXHIBIT A**. Also, applications and instructions can be obtained from the following sources:

Website: www.ago.state.ms.us

Mail: Mississippi Attorney General's Office
Law Enforcement Officers and
Fire Fighters Disability Benefits Trust Fund
P. O. Box 220
Jackson, MS 39205

Phone: (601) 359-3810

Applications for benefits must be submitted to the Mississippi Attorney General's Office at the mailing address listed above.

VII. APPLICATION/APPROVAL PROCESS

Upon receipt of the application, information on the application is reviewed/investigated to insure validity of the claim for benefits. If the application for benefits is approved

VII. APPLICATION/APPROVAL PROCESS (continued)

[based on the criteria stipulated in these policies and procedures and Section 45-2-21 of the Mississippi Code Annotated (1972)], a letter is sent via certified mail to the applicant indicating the approval of benefits, the amount of benefits to be awarded, the number of payments to be awarded, and the method of payment.

If the application for benefits is denied, a letter is sent via certified mail to the applicant including the grounds for denial of the application.

Applicants who disagree with any decision made have the right to appeal within thirty (30) days of receipt of the letter approving or denying benefits. For further information on the appeals process, see section XV.

Applications must be filed with the Mississippi Attorney General's Office within one (1) year of the date of injury.

Compensation shall not be awarded unless the incident of injury occurred on or after July 1, 2006.

VIII. BENEFIT PAYMENTS

Once the application is approved, the Mississippi Attorney General's Office will make a monthly disability benefit payment equal to thirty-four percent (34%) of the covered individual's regular base salary at the time of injury. The benefit is payable for the period of time the covered individual is physically unable to perform the duties of his or her employment [not to exceed twelve (12) total payments for any one (1) injury]. The physician's report (which is included in the application for benefits) will document the dates the applicant is unable to work and the anticipated return to work date.

Benefit payments will be mailed to the covered individual on the first working day of each calendar month. Benefit payments from the Law Enforcement Officers and Fire Fighters Disability Benefits Trust Fund are excluded from gross income and thus are not taxable.

IX. WORKERS' COMPENSATION

If the covered individual receives workers' compensation benefits in addition to benefits from the Law Enforcement Officers and Fire Fighters Disability Benefits Trust Fund, then payments from the Fund will be **limited to the difference between workers compensation benefits and the amount of the covered individual's regular base salary**.

X. CONFIDENTIALITY OF RECORDS

It is unlawful, except for purposes directly connected with the administration of the fund, for any person to solicit, disclose, receive or make use of or authorize, knowingly permit, participate in or acquiesce in the use of any list, or names of, or information concerning persons applying for or receiving awards under this chapter without the written consent of the claimant or recipient. The records, papers, files and communications of the staff administering the fund must be regarded as confidential information and privileged and are subject to the Mississippi Public Records Act of 1983.

XI. OVERPAYMENT OF BENEFITS

If a payment or overpayment of benefits is made due to clerical error, mistaken identity, or innocent misrepresentation by or on behalf of the covered individual, the covered individual is responsible for repayment of the benefits received.

XII. FALSE INFORMATION

The filing of a false application for benefits (i.e., fraudulent or false information is knowingly submitted and/or failure to disclose pertinent information) is unlawful. In addition to any criminal penalties, the Mississippi Attorney General's Office shall have a right to commence civil action for the recovery of benefits obtained by the covered individual upon filing a false application. In such cases, the defendant shall be responsible for the fees, court costs, and other expenses of litigation.

XIII. REDUCTION OF BENEFIT PAYMENTS

Not withstanding any other provisions herein, no benefit payments shall be made unless adequate funds are available in the Law Enforcement Officers and Fire Fighters Disability Benefits Trust Fund. The State shall not be liable for a written order to pay compensation, except to the extent that monies are available in the fund on the date the claim is approved. The Mississippi Attorney General's Office has the right to adjust benefit payments so that the total amount awarded does not exceed the amount of money on deposit in the fund. During the approved benefit period when such reduction is due to the unavailability of funds, covered individuals may not seek future reimbursements due to any reductions in benefit payments. The Mississippi Attorney General's Office may opt to suspend payments until sufficient funding is on deposit in the fund.

XIV. EMPLOYER RESPONSIBILITIES

The covered individual's employer is responsible for completing the "Employment Information" section of the application for benefits. In addition, the employer is required to send written notice in the format prescribed by the Mississippi Attorney General's Office notifying the Fund Administrator the exact date the employee returned to work. This written notice must be submitted no later than ten (10) working days after the employee returns to work. See format for "Employee Return to Work Letter" at **EXHIBIT B**.

XV. APPEALS

If the claim is denied for any reason, the applicant has the right to appeal within thirty (30) days of receipt of the letter denying benefits. The appeal process consists of two steps: reconsideration and a contested hearing.

Reconsideration is intended to be an informal resolution of a claim. If the applicant disagrees with the original determination, he or she may request reconsideration through the Director of Administration at the Mississippi Attorney General's Office.

If the applicant disagrees with the decision of reconsideration, he or she may request a contested hearing within fifteen (15) days of the decision of reconsideration before a committee. The committee consists of three (3) members appointed by the Attorney General. This hearing is informal; however, the applicant must appear in person at the hearing, and a record of the hearing is made. The decision made by the committee is the final decision of the Mississippi Attorney General's Office.

XVI. RE-CERTIFICATION OF BENEFITS

If a covered individual returns to work based on his or her physician's recommendation in the application for benefits and it is later determined the employee is still unable to perform his or her duties, the covered individual may apply for a re-certification of benefits. The covered individual must have his or her employer and physician complete the Application for Re-Certification of Benefits to extend the period the covered individual is unable to work. This period should begin on the last date worked (note: this date will be different from the date on the initial application for benefits). See **EXHIBIT C**. This application must be submitted as described in Section VI.