

Public Safety and Security Committee
JOINT FAVORABLE REPORT

Bill No.: HB-5279

AN ACT CONCERNING WORKERS' COMPENSATION COVERAGE FOR
POLICE OFFICERS AND FIREFIGHTERS FOR CERTAIN MEDICAL

Title: EMERGENCIES OCCURRING IN THE LINE OF DUTY.

Vote Date: 3/19/2024

Vote Action: Joint Favorable Substitute

PH Date: 2/29/2024

File No.:

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SPONSORS OF BILL:

Sen. Paul Cicarella, 34th Dist.

Sen. Saud Anwar, 3rd Dist.

Rep. Dave W. Yaccarino, 87th Dist.

Sen. Jeff Gordon, 35th Dist.

Rep. Ben McGorty, 122nd Dist.

Rep. Travis Simms, 140th Dist.

Rep. Tom Delnicki, 14th Dist.

Rep. Michael D Quinn, 82nd Dist.

Rep. Gary A. Turco, 27th Dist.

REASONS FOR BILL:

This bill compensates police officers, firefighters and their surviving families for line of duty death that occurred no later than 24 hours after conclusion of a shift or training during which such firefighter was involved in a nonroutine or strenuous physical activity. Causes of death by a cardiac event, stroke or pulmonary embolism.

The chief of such firefighter's fire department or police's police department, shall have the authority to determine whether it was a LODD death, unless local charter or ordinance in effect 7/1/2024 provides authority to a different individual or entity to make such determination. Such declarations shall not be used as evidence for a workers' compensation claim under Chapter 568.

Substitute Language:

Substitute language addressed in Section 1(b) of the bill addressed that in the case of the death of a uniformed paid or volunteer firefighter the chief of the department shall have the authority to determine if the firefighter died in the line of duty unless a local charter or ordinance in effect on 7/1/24 provides authority to a different person or entity.

RESPONSE FROM ADMINISTRATION/AGENCY:

None Expressed

NATURE AND SOURCES OF SUPPORT:

Greg Allard, President – Association of CT Ambulance Providers: Testified via correspondence in support of this bill. He strongly encouraged the inclusion of **Emergency Services Personnel**, as EMS is an important component of our first response system. They face challenges and risk in the line of duty just like firefighters and police officers, though the same they do exist and should be granted the same benefits. The last Workers' Compensation proposal that focused on mental health took multiple years to include first responders and it took a lot of time and effort to get that to occur. He pleaded to please so now.

Brian Anderson, Legislative Director – AFSCME Council 4: Testified in support of this bill via correspondence. He testified that this bill protects police officers, firefighters and their families for heart attack, stroke or other cerebrovascular or pulmonary embolism incidents. He stated that because of the physical demands of their jobs it is only fair that if they suffer a stroke within 24 hours of performing work related activities or trainings that they should be eligible for job related workers' compensation coverage.

Paul Anderson, President – Stamford Professional Fire Fighters Association (SPFFA) Local 786: Testified in support of this bill via correspondence. He testified that according to an NFPA research, by adjusting the reported period to 24-hours, one can fully capture cardiac failure among firefighters which allows us to more accurately identify the serious health risk firefighters face at work. The physical demands and the hazardous environment on the job all can have fatal consequences.

Saud Anwar, Senator – CGA 3rd District: Testified in support of this bill via correspondence. He testified that this bill would help to address some concerns by ensuring medical emergencies arising on the job during or after training or service would be considered in the line of duty. This bill serves to protect members of our Police and Firefighter forces who are dedicated toward public support.

Peter Brown, President – UPFFA of CT: Testified in support of this bill via correspondence. He testified that with all the advances in health and safety initiatives to reduce the frequency and severity of firefighter injuries and death, there is a loss of close to 100 firefighters nationally to non-cancer LODDs. Cardiac related deaths account for roughly 35%, per Mr. Brown. He went on to testify that the proposed legislation is a commonsense update to our existing law which puts CT in line with neighboring states, national fire service organizations and current Federal legislation. He stated that since 2002 the Public Service Officer Benefit

(PSOB), which is a federal program provides payments to families of fallen firefighters and police officers, has provided payments for all cardiac events occurring during the course of duty or within a reasonable time following an incident to these families, yet they are precluded from receiving several similar benefits offered at the state and local level.

John Carew, Legislative Representative – CSFA: Testified in support of this bill via correspondence with a few concerns. One concern is that the bill, as written, will exclude about 70% of the workforce it is trying to protect, such as, volunteer Firefighters, and non-municipal firefighting employees. The CSFA is asking that the language be changed to include ALL Firefighters. He continued to testify that thought there is a threat of the premium rising, and the insurance industry is against this bill, there has been no data represented to support this claim.

Katherine Couturier, MD/MPH-EMS Medical Director: Testified in support of this bill via correspondence. Katherine indicated that she is testifying in a personal capacity and not as an official of Yale School of Medicine or Yale New Haven Hospital. She testified that this bill expands a critical protection for those serving our communities. The nature of their work and the exposure to toxic chemicals, heat and cold conditions that are increasingly extreme and all place a profound burden to their cardiovascular systems, compounded by metabolic stress inherent with shift and overnight work which places the firefighters at risk for cardiovascular events including heart attack, stroke or blood clots in the lungs. These risks do not suddenly disappear the minute the firefighters leave the fireground. She went on to articulate that, "...we must protection for our firefighters who fall ill or die in the period immediately following their duties..."

Ed Hawthorne, President – CT AFL-CIO: Testified in support of this bill via correspondence. He testified that his company represents almost 250,000 active and retired workers in the private and public sectors and building trades. He expressed strong support for this bill. He also testified that this bill represents a critical step forward in acknowledging and addressing the unique risks and challenges faced by first responders. Including cerebrovascular incidents and pulmonary embolisms under the coverage recognizes the intense physical and emotional stress faced. The proposed bill acknowledges the inherent risks involved in nature of police and firefighting work and these risks can lead to serious health issues including the ones named and offers support for the people who put their lives on the line for their communities. He also testified that his bill recognizes the sacrifices made by them and a commitment to ensuring their welfare and that of their families.

Paul Januszewski, Fire Chief – Town of North Haven: Testified via correspondence in support of this bill. He testified that over the past two years his town lost 2 members, and, in both cases, a cardiac emergency was the cause of death. One FF (FF Wirtz) died on the fireground and the other (Lt. DeSimone) approximately 2.5 hours after being relieved of duty after working a 34-hour shift. In the case of the FF Wirtz, he was able to solely make the decision it was a line of duty death (LODD). In the second case (LT DeSimone) he was unable to immediately do so even though within 48-72 hours he had all his answers but was challenged by town leadership even though initial the decision was his to make. Chief Januszewski testified that he "...proposed this law and worked with legislators because we owe it to our first responders that put the well-being of others before our own...I regret being unable to provide a LODD funeral for Lt. DeSimone because he deserved it."

NATURE AND SOURCES OF OPPOSITION:

Kristina Baldwin, Vice President – APCIA: Testified via correspondence in opposition to this bill. She testified that this bill creates the presumption that a police officer's or firefighter's death or disability caused by a cerebrovascular or pulmonary embolism incident shall be presumed to have arisen out of and in the course of employment. She went on to testify that there is not policy justification for creating a statutory presumption of coverage for a particular class of employees suffering a particular class of injury or disease. The burden of proof that the injury or disease was work related should always remain on the claimant seeking the no-fault benefits and workers' compensation is not a form of general health insurance or retirement benefits.

Carl Fortuna, First Selectman – Town of Old Saybrook: Testified via correspondence in opposition. He testified that this mandate is contrary to the fundamental premise of workers' compensation by shifting the burden of proof from the individual to the employer and that the first responders are not the issue. Mr. Fortuna also testified that the extended time frame ignores critical determining factors such as family medical history, lifestyle habits, and diet which may have contributed to the incident. He went on to testified that this proposal would resurrect the heart and hypertension mandate and may introduce other costly presumptions into the workers compensation system.

Brooke Foley, Counsel – Insurance Association of CT: Testified in opposition via correspondence to this bill. Brooke testified that this bill goes against the long-standing public policy that requires there be a causal connection and that municipalities and insurers may become liable for indemnity and medical benefits without workers having to prove their condition was related to their employment. his bill will cause claims unrelated to work to be accepted as work-related. Brooke continued to testify that it is important to recognize the reality that specific diagnoses are common among members of the public, therefore it is not accurate to presume that all cases of these diseases arise out of the scope of employment. In conclusion, testimony stated that enacting this bill will likely lead to a significant increase in workers' compensation system costs, complex claims, and prolonged litigation that would result in exorbitant legal expenses for employers and claimants.

Betsy Gara, Executive Director – COST: Testified via correspondence in opposition. Connecticut Council of Small Towns (COST) are concerned with the bill, that it will increase workers' compensation costs thus placing a financial burden on towns and their taxpayers. She testified that shifting the burden of proof to municipalities, this bill opens the door to impose a costly unfunded mandate to towns and cities. She encourages lawmakers to fully consider the fiscal impact of this bill.

Matt Knickerboker, Town Administrator – Town of Wilton and CCM: Testified via correspondence in opposition to this bill for the Connecticut Conference of Municipalities (CCM). He testified of their concerns with the bill that emergencies during employment or 24 hours after shift would enable the employee to be eligible for benefits and the burden of proof would be switched from the individual to the employer to determine cause. He also drew the similarity of this bill as a resurrection of the heart and hypertension mandate which would introduce other presumptions in the workers compensation system. He also has concern about the cost implications on local property taxpayers for a new unfunded state mandate.

Mike Muszynski, CCM & Mike Knickerboker, Town Administrator – Town of Wilton and

CCM: Testified via correspondence in opposition to this bill. He testified that his organization has serious concerns that the bill would establish a presumption under workers' compensation that if any paid firefighter or police officer has a medical emergency any time during their employment, or 24-hours after their shift, which causes death or temporary, permanent disability that it would be work related and therefore eligible for benefits. This bill contradicts a key principle of workers' compensation. Currently employees must prove their illness or injury is work related in order to receive benefits, this bill would flip that responsibility and force employers to disprove the work relatedness of certain medical conditions. This change raises concerns about placing a greater financial and administrative burden on local communities. His testimony also reflected that this bill also raises concerns as the broad timeframe fails to consider the potential influence of non-work-related factors that could contribute to the event. Family medical history, personal lifestyle choices and dietary habits are also crucial and influencing factors that this bill fails to consider, per Mr. Muszynski.

Further testimony stated that as in current practice, the injured employee and their doctor would need to provide evidence clearly linking the illness or injury to their employment. This documentation requirement is standard practice for all claims within the workers' compensation system.

This prospect deeply troubles local officials who are already grappling with financial burdens of a regressive property tax system.

Reported by: Michelle Adams

Date: March 21, 2024