MUNICIPAL FIRE AND POLICE RETIREMENT
SYSTEM OF IOWA
7155 Lake Drive, Suite 201
West Des Moines, IA 50266

IN THE MATTER OF:	:	
ROBERT WILSON,	:	DECISION
Applicant.	:	

Iowa Code § 411.6(3) (2024) and
Iowa Code § 411.6(5) (2024)

STATEMENT OF THE CASE

Robert Wilson ("Applicant") filed an application for an accidental disability pension on or about February 17, 2025. On April 23, 2025, the Medical Board of the University of Iowa Hospitals and Clinics (the "Medical Board") reported its findings to the System. The Medical Board issued an addendum on May 28, 2025. The System issued an initial decision denying accidental disability benefits for heart disease and lung disease on June 11, 2025. On July 2, 2025, Applicant filed a timely appeal challenging the denial of an accidental disability pension for heart disease and lung disease. A hearing was held before the Disability Appeals Committee of the Board, composed of Corey Goodenow, Duane Pitcher, and Frank Guinan, on July 8, 2026, at the offices of the System.[1] Duane Pitcher served as Chair. Applicant appeared and was represented by attorney Christopher Stewart. The City of Sioux City (the "City") appeared and was represented by attorney Connie Anstey. Daniel Cassady, Director, appeared on behalf of the System. Jennifer Lindberg was present as counsel to the Committee. The Committee received testimony from Applicant, Dan Cougill, and Fire Chief Collins. The parties submitted post-hearing briefs on August 11, 2026.

FINDINGS OF FACT

The Committee, having reviewed the evidence of record, finds as follows:

The Application and Medical Board Review

1. Applicant was born on April 9, 1963. Applicant commenced service as a firefighter for the City of Sioux City on September 8, 1986. As of the date Applicant filed his

[1] The hearing in this matter was continued multiple times at the request of the parties, with the most recent continuance granted after Applicant experienced an Afib incident days before the hearing was scheduled to take place.

application for disability benefits, Applicant held the rank of Operations Assistant Fire Chief ("OAFC")[2] with the Sioux City Fire Department. At the time of his application for disability benefits, Applicant was still employed by the City and was on paid administrative leave. **MFPRSI Ex. 1.**

2. On April 23, 2025, the System's Medical Board opined that Applicant was unable to perform the full duties of an OAFC as a consequence of atrial fibrillation while on Eliquis (the "Initial Opinion"). The Medical Board further opined that the incapacity was likely to be permanent based on the impression that it will be of at least one year's duration. The Medical Board opined that Applicant was not disabled as a result of lung disease. **MFPRSI Ex. 5.**

3. After receiving the Medical Board's Initial Opinion, the City submitted comments to the System as permitted under MFPRSI Administrative Rule 9.2(2)(e). The submission included a March 18, 2025, report from Dr. Jeffrey Sykes, one of Applicant's treating physicians, who opined that Applicant "has no cardiac condition that would restrict his duties at work," and correspondence from Sioux City Fire Chief, Ryan Collins discussing Applicant's job duties and requirements. **MFPRSI Ex. 5-36 – 5-49.** The System provided this information to the Medical Board. **MFPRSI Ex. 5-34.**

4. On May 28, 2025, the Medical Board provided an addendum to the Initial Opinion (the "Addendum"). The Medical Board opined that if the "job description for which Mr. Wilson was to be evaluated by the Medical Board is indeed primarily administrative in nature and does not require use of a SCBA or entry into IDLH environments, then it is the opinion of Dr. Iverson and Dr. Benson that Mr. Wilson is able to perform these full job duties despite his diagnosis of paroxysmal atrial fibrillation (on Eliquis)." **MFPRSI Ex. 5-32.**[3]

5. Applicant submitted comments in response to the Addendum pursuant to MFPRSI Administrative Rule 9.2(2)(e). He stated that his job duties may, during an emergency, require him to wear personal protective equipment, including use of SCBA in IDLH atmospheres. **MFPRSI Ex. 5-3 – 5-6.** The System then provided Applicant's letter to the Sioux City Fire Chief and requested confirmation whether the ability to use SCBA is a requirement for the OAFC position. **MFPRSI Ex. 5-2.** The Fire Chief responded that "[t]he Assistant Fire Chief job classification included with …[the] application should serve as the reference for evaluating the extent of his impairment. This classification, last updated in March 2000, does <u>not</u> list the ability to use a SCBA as a job requirement for the Assistant Fire Chief position." **MFPRSI Ex. 5-1.**

6. The System issued a decision denying accidental disability benefits for heart and lung disease because the Medical Board concluded those conditions did not limit Applicant's ability to perform the full duties of a Sioux City OAFC. **MFPRSI Ex. 6.**

---

[2] This position has also been titled the Assistant Fire Chief, but will be referred to as the OAFC throughout.

[3] SCBA is an acronym for self-contained breathing apparatus.
IDLH is an acronym for Immediately Dangerous to Life and Health.

Applicant timely appealed to the System on July 2, 2025. **MFPRSI Ex. 7.** The City did not appeal the decision.

Applicant's Medical Records

7. The medical records show Applicant first presented with atrial fibrillation ("Afib") on March 31, 2020, during a visit with his primary care physician, Dr. Michael Brenner. **MFPRSI Ex. 4A-95 – 4A-97.**[4] Dr. Brenner started Applicant on Eliquis. **MFPRSI Ex. 4A-97.** Applicant first saw Dr. Jeffrey Sykes with UnityPoint Health Cardiology on October 30, 2024. Dr. Sykes diagnosed Applicant with paroxysmal atrial fibrillation and noted Applicant reported palpitations during stressful situations at work. **MFPRSI Ex. 4B-1 – 4B-3.** Applicant saw Dr. Sykes again in January 2025 and underwent Holter-monitor testing. **MFPRSI Ex. 4B-4 – 4B-5.** The testing showed no evidence of any Afib events during the 14-day period. **MFPRSI Ex. 4B-6 – 4B-7.**

8. Applicant's medical records also include vascular screening and testing performed in February 2025. **MFPRSI Ex. 4A-207, 4A-210.** Applicant's calcium score was 377.9, indicating moderate evidence of coronary artery disease. **MFPRSI Ex. 4A-210.**

9. Applicant also saw Dr. Rodney Cassens, the City's occupational health physician. Applicant first saw Dr. Cassens on February 17, 2025, at which time Dr. Cassens diagnosed him with paroxysmal atrial fibrillation. **MFPRSI Ex. 4E-1.** Applicant was placed on limited duty and given a weight restriction to prevent exacerbations of his cardiac conditions. **MFPRSI Ex. 4E-1 – 4E-4.** He was released from restricted duty after a follow-up appointment with Dr. Cassens on March 3, 2025. **MFPRSI Ex. 4E-6.**

Depositions of the Medical Board

10. On October 7, 2025, as permitted under MFPRSI Administrative Rule 6.10, Applicant took the depositions of Dr. Iverson and Dr. Benson of the Medical Board.

11. Dr. Iverson testified that he originally opined Applicant was unable to fully perform the duties of the job description included with the application because of his history of Afib and his prescription anticoagulant. **City Exhibit 2, Iverson Deposition Tr. 16:21 – 17:17.** He specifically noted concerns with the impact of physical exertion and Applicant potentially having to wear turnout gear and use SCBA. **City Exhibit 2, Iverson Deposition Tr. 18:6 – 19:10.** Dr. Iverson testified that, after reviewing information provided by the City, he changed his opinion regarding whether Applicant could perform the full duties of his job. **City Exhibit 2, Iverson Deposition Tr. 21:17 – 21:25.** He clarified that if Applicant's job duties were purely administrative, Applicant could fulfill those duties. **City Exhibit 2, Iverson Deposition Tr. 24:22 – 25:2.** However, if Applicant needed SCBA or was in an IDLH situation, he would be

[4] The records suggest, but do not expressly state, that the illness for which Applicant sought treatment at this visit was COVID-19.

unable to perform the full duties of his job. **City Exhibit 2, Iverson Deposition Tr. 25:3 – 26:2.**

12. Dr. Benson testified there is no dispute that Applicant suffers from Afib. **City Exhibit 1, Benson Deposition Tr. 8:25 – 9:4.** He testified that if Applicant was required to use SCBA, wear turnout gear, and enter fire environments, Applicant should not serve in his current role because he could put himself or others at risk. **City Exhibit 1, Benson Deposition Tr. 12:1 – 12:17.**

Hearing Testimony

13. Applicant began serving as OAFC in 2006. **Hearing Tr. 17:15 – 17:16.** He described the OAFC role as similar to a "coach" who manages crews at an emergency scene to make sure everyone is on the same page. **Hearing Tr. 23:5 – 24:4.** He testified that, when serving in that capacity, he used a command vehicle that carried his specially assigned SCBA.[5] **Hearing Tr. 34:6 – 34:12.** He had not used SCBA on a scene for at least six years. **Hearing Tr. 64:6 – 64:24.**

14. The OAFC job classification requires an OAFC to take command when first on scene, preserve potential evidence, respond to alarms, and "report to duty in the event of a Support Alarm." **Hearing Tr. 41:19 – 44:22.** An OAFC is subject to the Department's personal grooming standards, which require that facial hair growth not interfere with the seal of the face piece. **Members Exhibit 7; Hearing Tr. 51:8 – 52:9.**

15. Applicant testified that he was diagnosed with Afib in 2020. **Hearing Tr. 63:12 – 63:13.** [6] He initially thought the condition would subside or be managed by Eliquis, which he began taking that year.[7] **Hearing Tr. 66:10 – 66:18.** He experienced chest pain while running an emergency fire call as incident commander on January 1, 2025. **Hearing Tr. 18:24 – 19:2; 25:14 – 26:18.** After that incident, the City's physician placed him on restrictions. **Hearing Tr. 30:20 – 30:23.** Applicant testified that Afib can impact his communication skills and limit his ability to meet the physical exertion requirements of the job. **Hearing Tr. 37:23 – 39:4.**

16. At the hearing, the City argued that the System's decision should be upheld. The City presented testimony from Fire Chief Ryan Collins. Chief Collins testified that Applicant's job description and duties did not expressly include SCBA use. **Hearing Tr. 116:6 – 116:9.** However, Chief Collins testified that safety is the Department's number one priority and the Department conducts SCBA fitting and training so firefighters are prepared if SCBA use is needed. **Hearing Tr. 122:4 – 122:24.** Chief

[5] Applicant testified that he was subject to annual fittings and testing for his face piece. **Hearing Tr. 46:21 – 47:15.**

[6] Much testimony was elicited regarding whether and when Applicant provided information regarding this diagnosis to the City. That issue is not material to the Committee's consideration of the appeal.

[7] Eliquis is a blood thinning medication.

Collins also testified that he would expect Applicant to use SCBA if needed during an incident response. **Hearing Tr. 124:14 – 124:16.**

Post-Hearing Briefs

17. The parties submitted post-hearing briefs on August 11, 2026. Applicant argued SCBA or turnout-gear use was a regular part of his job and that, based on his disability, he would not have been able to complete his duties in situations requiring SCBA. **Applicant Post-Hearing Brief, pg. 5.** He stated the Medical Board was clear he could not perform his job if he had to use SCBA, turnout gear, or enter an IDLH environment, and that because the City expected him to use SCBA and turnout gear and work in IDLH environments, he is unable to perform his job duties. **Applicant Post-Hearing Brief, pgs. 6 – 7.** He asserted that his symptoms limit his ability to complete the duties required of him as an OAFC. **Applicant Post-Hearing Brief, pg. 11.**

18. The City argued Applicant failed to provide sufficient evidence that the System's decision should be amended from an ordinary disability to accidental disability. **Sioux City Post-Hearing Brief, pg. 2.** The City asserts the OAFC position does not require SCBA use, although SCBA is available in case of an emergency. **Id.** The City states that an emergency situation of this kind is rare, as neither the Fire Chief nor Applicant could identify such an event. **Id.** The City also argues that the OAFC position does not "contain" the requirement that an individual enter IDLH conditions. **Id.** Accordingly, the City argues that the "extremely remote possibility" that Applicant might use SCBA is not sufficient to support his claim for an accidental disability. **Sioux City Post-Hearing Brief, pg. 3.**[8]

CONCLUSIONS OF LAW

1. Iowa Code § 411.6(3) states:

> 3. *Ordinary disability retirement benefit.*
>
> Upon application to the system, of a member in good standing or of the chief of the police or fire departments, respectively, any member in good standing shall be retired by the system, not less than thirty and not more than ninety days next following the date of filing the application, on an ordinary disability retirement allowance, if the medical board after a medical examination of the member certifies that the member is mentally or physically incapacitated for further performance of duty, that the incapacity is likely to be permanent, and that the member should be retired. However, if a person's membership in the system first commenced on or after July 1, 1992, the member shall not be eligible for benefits with respect

[8] The City cites *In the Matter of Helfrich*, February 9, 2005, for the proposition that "[e]xistence of a presumptive condition for medical coverage is not sufficient to support a disability application." **Sioux City Post-Hearing Brief, pgs. 3 – 4.** The facts in the instant appeal are distinct from those present in *Helfrich*, notably due to the fact the Medical Board here opined that Applicant was disabled.

to a disability which would not exist, but for a medical condition that was known to exist on the date that membership commenced. A medical condition shall be deemed to have been known to exist on the date that membership commenced if the medical condition is reflected in any record or document completed or obtained in accordance with the system's medical protocols pursuant to section 400.8, or in any other record or document obtained pursuant to an application for disability benefits from the system, if such record or document existed prior to the date membership commenced. A member who is denied a benefit under this subsection, by reason of a finding by the medical board that the member is not mentally or physically incapacitated for the further performance of duty, shall be entitled to be restored to active service in the same position held immediately prior to the application for disability benefits. The member-in-good-standing requirement of this subsection may be waived for good cause as determined by the board. The burden of establishing good cause is on the member.

2. Iowa Code § 411.6(5) states (in relevant part) as follows:

> 5. *Accidental disability benefit.*
>
> *a.* Upon application to the system of a member in good standing, of an ordinary disability beneficiary, or of the chief of the police or fire departments, respectively, any member in good standing or ordinary disability beneficiary who has become ***totally and permanently incapacitated for duty as the natural and proximate result of an injury or disease*** incurred in or aggravated by the actual performance of duty or arising out of and in the course of employment, or while acting, pursuant to order, outside of the city by which the member is regularly employed, shall be retired by the system, or may have a retirement for an ordinary disability converted to a retirement for an accidental disability, if the medical board certifies that the member or ordinary disability beneficiary is mentally or physically incapacitated for further performance of duty, that the incapacity is likely to be permanent, and that the member should be retired or should have a retirement for an ordinary disability converted to a retirement for an accidental disability. However, if a person's membership in the system first commenced on or after July 1, 1992, the member or ordinary disability beneficiary shall not be eligible for benefits with respect to a disability which would not exist, but for a medical condition that was known to exist on the date that membership commenced. A medical condition shall be deemed to have been known to exist on the date that membership commenced if the medical condition is reflected in any record or document completed or obtained in accordance with the system's medical protocols pursuant to section 400.8, or in any other record or document obtained pursuant to an application for disability benefits from the system, if such record or document existed prior to the date membership commenced. A member who is denied a benefit under this subsection, by reason of a finding by the medical board that the member is not mentally or physically

> incapacitated for the further performance of duty, shall be entitled to be restored to active service in the same position held immediately prior to the application for disability benefits.
>
> (emphasis added).

3. No evidence was presented showing Applicant was not a member in good standing at the time he submitted his application for an accidental disability retirement.

4. A qualifying "disease" is presumed to have been contracted while on active duty. Iowa Code § 411.6(5)(c) provides:

> (1) Disease under this subsection shall mean heart disease or any disease of the lungs or respiratory tract and shall be presumed to have been contracted while on active duty as a result of strain or the inhalation of noxious fumes, poison, or gases. (2) Disease under this subsection shall also mean cancer or infectious disease and shall be presumed to have been contracted while on active duty as a result of that duty. (3) However, if a person's membership in the system first commenced on or after July 1, 1992, and the heart disease, disease of the lungs or respiratory tract, cancer, or infectious disease would not exist, but for a medical condition that was known to exist on the date that membership commenced, the presumption established in this paragraph "c" shall not apply.

5. Applicant's claimed heart disease falls within the category of "disease" identified in Iowa Code § 411.6(5)(c). The statutory presumption therefore applies to causation, but Applicant must still establish that the condition rendered him totally and permanently incapacitated for duty.

6. The question before the Committee is therefore whether Applicant's heart disease limits his ability to perform the full duties of a firefighter and is thus disabling.[9]

7. The Medical Board's Initial Opinion stated that Applicant was unable to perform the full duties of an Assistant Fire Chief as a consequence of atrial fibrillation on Eliquis. **MFPRSI Ex. 5.** After the City submitted additional information regarding the OAFC job description and duties, the Medical Board clarified that if Applicant's job was primarily administrative and did not require SCBA use or entry into IDLH environments, Applicant could perform the full duties of that position despite his diagnosis. **MFPRSI Ex. 5-32.**

8. The Committee reviewed the correspondence provided by Applicant and the City concerning the OAFC job description and requirements submitted to the Medical Board, as well as the various correspondence from additional medical providers.

[9] Applicant's application sought disability benefits arising from a lung condition, but Applicant did not present information regarding an alleged lung condition at the hearing on this matter.

9. The Committee also considered the hearing testimony regarding SCBA and turnout gear use. Based on this testimony, the Committee finds that: Applicant was assigned a personal, fitted SCBA facepiece, he underwent annual fit testing and training for the SCBA, he was required to maintain his SCBA facepiece, his personal SCBA facepiece was stored and maintained in his command vehicle, OSHA requires first responders to wear SCBA in a toxic environment, and that changing conditions at a fire scene may require Incident Command such as Applicant to use SCBA.

10. The Committee also considered the testimony from Chief Collins, specifically that he expected Applicant to use SCBA if needed in a response situation. They also considered his testimony that the Department conducts SCBA training and fitting so its firefighters are prepared when SCBA use is necessary. As Chief Collins credibly testified, when conditions require SCBA, Applicant would be expected to wear and safely use it. He further testified that while the need may arise infrequently, when it does, SCBA use is not optional. The Committee therefore finds that Applicant provided substantial evidence to demonstrate the ability to safely wear turnout gear and use SCBA is a requirement of Applicant's job.

11. The Medical Board's Initial Opinion concluded that Applicant could not perform the full duties of his position if those duties required SCBA use or entry into an IDLH environment. Because the Committee finds that the ability to use SCBA and enter an IDLH environment when needed is a job requirement, it concludes that Applicant is unable to perform the full duties of his position and is therefore disabled. After reviewing the other medical information submitted by the City, the Committee finds no reason to depart from the Initial Opinion.

DECISION

The appeal for an accidental disability pension on behalf of Robert Wilson under Chapter 411 is hereby granted.

Dated this 20th day of August, 2026.

Duane Pitcher, Chair
Disability Appeals Committee

COPIES TO:

Chris Stewart
Boles, Witosky, Stewart Law
2015 Grand Avenue, Suite 200
Des Moines, IA 50312
Counsel for Member

Connie E. Anstey
City of Sioux City
405 6th Street
P.O. Box 447
Sioux City, Iowa 51102
Counsel for City of Sioux City

Daniel Cassady, Director
Municipal Fire and Police Retirement
System of Iowa
7155 Lake Drive, Suite 201
West Des Moines, IA 50266

Jennifer Lindberg
Brown, Winick, Graves, Gross, and
Baskerville, P.L.C.
666 Grand Suite 2000
Des Moines, IA 50309
Counsel for Committee

CERTIFICATE OF SERVICE

The undersigned hereby certifies that a true copy of the foregoing instrument was served upon each of the attorneys of record of all parties to the above-entitled cause by enclosing the same in an envelope addressed to each such attorney at such attorney's address as disclosed by the pleadings of record herein on the 20 day of August, 2026.

By: ☐ **U.S. Mail** ☐ **Facsimile**
☐ **Hand Delivered** ☐ **Overnight Courier**
☐ **Federal Express** ☒ **Other** email

Signature Jill Hagge