



LEOFF DISABILITY BOARD AGENDA
Wednesday, January 31, 2018 at 1:30 p.m.
Camas City Hall, 616 NE 4th Avenue

SPECIAL MEETING

- I. CALL TO ORDER BY CHAIR**
- II. APPROVAL OF THE MINUTES**
- III. CLAIMS SUMMARY REPORT**
- IV. OTHER BUSINESS**
 - A. Selection of Chair and Vice-Chair
 - B. Review and Approval of Updates to Rules and Procedures Manual
- V. ADJOURNMENT**

Agenda Item II

Approval of the Minutes

Discussion:

The minutes from the October 6, 2017 meeting are included in this packet.

Minutes should be reviewed and approved as-is or with necessary changes/edits.

Action requested:

- Motion to approve the minutes from the October 6, 2017 meeting.

IF CHANGES REQUESTED:

- Motion to approve the minutes from the October 6, 2017 meeting with the discussed changes.



**LEOFF DISABILITY Board
MEETING MINUTES - Draft
October 6, 2017, 10:00 a.m.**

SPECIAL MEETING

Present: Paul Berg, Don Chaney, Joan Durgin, Bob Rhode and Melissa Smith

Excused:

Staff: Leisha Copsey, Jennifer Gorsuch and David Schultz

I. CALL TO ORDER BY CHAIR

Chair Smith called the meeting to order at 10:02 a.m.

II. APPROVAL OF THE MINUTES

It was moved by Council Member Chaney, seconded by Vice-Chair Durgin, to approve the meeting minutes of August 16, 2017. The motion carried unanimously.

III. CLAIMS SUMMARY REPORT

Administrative Services Director Gorsuch reviewed the reimbursement claims that were submitted and processed from August 1, 2017 through September 30, 2017, in the amount of \$16,977.33, with the Board. These claims were approved by the Administrative Services Director per the authority delegated by the Board.

Gorsuch responded to questions from the Board.

It was moved by Vice-Chair Durgin, seconded by Board Member Rhode, to approve the Claims Summary Report in the amount of \$16,977.33 as presented. The motion carried unanimously.

IV. CLOSED SESSION

Chair Smith stated that the Board will be going into a closed session to discuss a Quasi-Judicial matter. The Board went into a closed session at 10:04 a.m.

The meeting reconvened at 10:26 a.m.

V. OTHER BUSINESS

A. Decision Regarding Retiree Coverage Request Discussed During Closed Session

It was moved by Board Member Berg, seconded by Vice-Chair Durgin, to approve home health care services as discussed and reviewed during the closed session for member Deloy Little as requested for 6 months. The motion carried unanimously.

Gorsuch will secure medical documentation from the doctor at the end of the 6 month period for the Board's review.

VI. ADJOURNMENT

The meeting adjourned at 10:27 p.m.

Agenda Item III

Claims Summary Report

Discussion:

A summary of all reimbursement requests processed from October 1, 2017 through December 31, 2017 are included for review in the attached spreadsheet. The total amount of reimbursements is \$59,141.74.

These reimbursement requests were authorized by the Administrative Services Director, as outlined in the delegation of authority given by the Board.

The documentation submitted will be available at this meeting for review or in the event of questions from the Board.

Action requested:

- Motion to approve the City of Camas LEOFF Disability Board reimbursements as presented.

**LEOFF I Disability Board
Reported Expenses**

2017													
Expense Type	Jan-17	Feb-17	Mar-17	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	YTD Total
Medicare Premiums			\$ 4,410.00	\$ 102.60		\$ 4,512.60			\$ 4,197.90			\$ 4,197.90	\$ 17,421.00
Rx/Office Visits/Co-pays		\$ 35.00	\$ 35.00	\$ 272.56		\$ 719.05	\$ 254.00	\$ 280.21	\$ 7.65	\$ 45.00	\$ 1,158.52	\$ 1,159.19	\$ 3,966.18
Dental Care (Verde)	\$ 290.00		\$ 1,431.00	\$ 1,534.00	\$ 2,134.00	\$ 224.00	\$ 402.00	\$ 337.00	\$ 359.00		\$ 376.00	\$ 100.00	\$ 7,187.00
Eye Care								\$ 163.18			\$ 173.40	\$ 121.82	\$ 458.40
Hearing Aids		\$ 1,743.34										\$ 1,343.34	\$ 3,086.68
Medical Equipment		\$ 215.72							\$ 1,142.39		\$ 216.58	\$ 172.00	\$ 1,746.69
Assisted Living (pre-approved)	\$ 4,845.50	\$ 5,058.25		\$ 5,271.00	\$ 5,271.00	\$ 5,159.40	\$ 5,067.50	\$ 5,067.50	\$ 5,067.50	\$ 4,235.00	\$ 4,235.00	\$ 10,928.82	\$ 60,206.47
In Home Care (pre-approved)												\$ 29,624.17	\$ 29,624.17
Miscellaneous								\$ 355.00				\$ 1,055.00	\$ 1,410.00
Total	\$ 5,135.50	\$ 7,052.31	\$ 5,876.00	\$ 7,180.16	\$ 7,405.00	\$ 10,615.05	\$ 5,723.50	\$ 6,202.89	\$ 10,774.44	\$ 4,280.00	\$ 6,159.50	\$ 48,702.24	\$ 125,106.59

Police **613.00.521.201.21 (8 participants)**

Kaiser reimbursed \$10 co-pay to M. Slyter

Fire **613.00.522.215.21 (3 participants)**

Descriptions

Medicare Part B
 Rx/Office Visits/Co-pays
 Dental (Fl. Last name)
 Eye Care
 Hearing Aid
 Med. Equip.
 Assisted Living (Fl. Last name, Month Year)
 In Home Care (Fl. Last name)
 Misc. Medical Expenses

Agenda Item IV

A. Selection of Chair and Vice-Chair

Discussion:

Selection of a Chairperson and Vice-Chairperson for the LEOFF Board is required.

The Chairperson shall preside over all meetings of the Board. The Chairperson shall sign all documents requiring the signature of the Board and his/her signature of the Board shall be as legal and binding as if all members had affixed their names.

The Vice-Chairperson shall perform the duties of the Chairperson in the absence of the Chairperson.

The term of office for both positions is one year, expiring December 31, 2018.

Action requested:

- Motion to nominate a member of the Board for the position of Chairperson effective January 1, 2018, for a one year term expiring December 31, 2018.

AND

- Motion to nominate a member of the Board for the position of Vice-Chairperson effective January 1, 2018, for a one year term expiring December 31, 2018.

Agenda Item IV

B. Review and Approval of Updates to Rules and Procedures Manual

Discussion:

The LEOFF Board requires rules and procedures to follow in order to appropriately conduct business and provide proper reimbursements.

Since the Camas Board was created at the end of 2016, it has been discovered that there are some errors and clarifications that need to be made in the Rules and Procedures.

Staff proposes the following edits to the Rules and Procedures:

- Section III Meetings (E) – Correction – We had previously referred to Executive Sessions, and not Closed Sessions. Per legal counsel, Closed Sessions is correct.
- Section VII Medical Claims Part A
 - (c) – Add coverage – Acupuncture is not listed as a covered service. However, it is covered under the Regence plan for LEOFF I members, but not the Kaiser plan. Staff proposes to add acupuncture and cover at the same visit limit as chiropractic, which is common in active plans. This would maintain consistency in benefits for all retirees.
 - (e) – Clarification – Include home health aide.
 - (j) – Add coverage – The rules state that rental of medical equipment is covered, but does not address purchase. Staff proposes to add the purchase option which would require a doctor's note/prescription and submission to Medicare and secondary insurance prior to requesting reimbursement. Staff also requests the ability to waive the requirement to bill Medicare in extenuating circumstances (i.e. low cost item, known to not be covered by Medicare).
 - (q) – Clarification – Staff believes the intent of the vision insurance was to allow either contacts OR glasses in a calendar year, not both, since the rules only allow for 1 pair of glasses in a year.

- Section VII Medical Claims C – Correction – Current language does not make sense.
 - Section VIII Appeals A & B – Clarification – Per legal counsel, these sections have been updated for accuracy.
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Action requested:

- Motion to adopt updates to the City of Camas LEOFF Board Rules and Procedure Manual as presented.

OR

- Motion to adopt updates to the City of Camas LEOFF Board Rules and Procedure Manual as presented with the proposed changes by the Board.

CITY OF CAMAS

LAW ENFORCEMENT OFFICERS' AND FIREFIGHTERS' DISABILITY BOARD

RULES AND PROCEDURE MANUAL

~~December 2016~~

January 2018

CITY OF CAMAS DISABILITY BOARD

RULES AND PROCEDURES

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SECTION I – INTRODUCTION

I. INTRODUCTION

- A. Purpose: To establish rules and procedures and administrative policies regarding the conduct of business of the City of Camas Disability Board in order to ensure compliance with the provisions of RCW 41.26 (Law Enforcement Officers and Fire Fighters Retirement System Act).
- B. Scope: The provisions outlined in these procedures apply only to members who were employed prior to October 1, 1977.
- C. Distribution: Copies of these rules and any amendments hereto shall be provided by the Assistant to the Board to each active and retired LEOFF Plan I member subject to the jurisdiction of the Board.

SECTION II – THE BOARD

II. THE BOARD

A. Membership: (Five Members)

1. Two members from the Camas City Council who are appointed by the Mayor.
2. One active or retired firefighter employed by or retired from the City of Camas who is elected by the firefighters employed by or retired from the City of Camas who are subject to the jurisdiction of the Board.
3. One active or retired law enforcement officer employed by or retired from the City who is elected by the law enforcement officers employed by or retired from the City of Camas who are subject to the jurisdiction of the Board.
4. One member from the public at large who resides within the City of Camas and who is appointed by the other four members described above.

B. Terms: Members shall serve a two (2) year term and all terms shall expire on the 31st day of December of the last year for which the term is made, provided each member shall hold office until a successor is appointed or elected.

C. Nomination and Election:

1. *City Council Members.* Prior to October 1 of the year of the term of expiration, the Assistant to the Board will provide notification to the Mayor of the need for appointments for the expiring terms. No later than December 1, the Mayor shall notify the Assistant to the Board of the selected Councilmember(s) to succeed the expiring member's term.
2. *Law Enforcement Officer and Firefighter Members.* Prior to October 1 of the year of the term of expiration, the Assistant to the Board will request nominees for the firefighter and law enforcement representatives who are subject under the jurisdiction of the Board. Such nominee(s) may be either active or retired LEOFF I members. The agency shall take appropriate action to provide notice of acceptance of Disability Board nominations to both active and retired employees eligible for nomination. In particular, such notice to retired employees shall specify the procedure and time frame for nomination and election. No later than November 1, the Assistant to the Board will send a list of all respective nominees to all fire and law enforcement members under the jurisdiction of the Board. The ballots will be returned to the Assistant no later than December 1. Any ballots received after December 1 will not be counted.
3. *Public-at-large member.* Prior to October 1 of the year of the term of expiration, the Assistant to the Board will solicit interest from the public for the public-at-large member

for a two week period. Prior to November 1, the Assistant will forward the names of interested citizens to the other 4 members and a meeting will be scheduled to select the public-at-large member for the new term.

- D. Vacancies: Vacant appointed positions on the Board shall be filled by mayoral appointment and vacant elected positions shall be filled pursuant to the applicable election method listed above.
- E. Pending Matters: Board members whose successors have been appointed or elected may continue to perform Board duties to the extent necessary to complete action on pending applications/Board business where participation by the new member would be inappropriate.
- F. Officers: The Board shall elect from its members a Chairperson and Vice-Chairperson annually at the first meeting that occurs on or follows the first Monday in January. The Chairperson shall preside over all meetings of the Board. The Chairperson shall sign all documents requiring the signature of the Board and his/her signature of the Board shall be as legal and binding as if all members had affixed their names.

The Vice-Chairperson shall perform the duties of the Chairperson in the absence of the chairperson.

- G. Assistant to the Board: The City's Administrative Services Director will designate, from among departmental employees, an Assistant to the Board. The duties of the Assistant, with oversight by the Administrative Services Director include:
 - 1. Notification to members of date, time and location of scheduled meetings.
 - 2. Prepare agendas for meeting.
 - 3. Distribute agenda, previous meeting minutes and packets to the Board members prior to the meeting.
 - 4. Record minutes of Board meetings.
 - 5. Inform claimants upon request of necessary forms and documents necessary to make a claim.
 - 6. Provide claimants, upon request, with necessary forms.
 - 7. Ensure that all benefits under insurance or health care plans are obtained prior to payments by the Disability Board.
 - 8. Arrange doctors' appointments for claimant as required by Disability Board.
 - 9. Notify claimant of doctors' appointment when required by Disability Board.
 - 10. Assist Administrative Services Director in preparing the annual budget.
 - 11. Assist claimants, when requested, in preparing paperwork for claim approval by the Board.
 - 12. Approve and process expenditures that have been approved by the Board as recorded in the Board proceedings.
 - 13. Prepare and send all necessary correspondence and forms to the State Retirement Board and claimants.
 - 14. Order supplies.

- H. Expenses: Members shall receive no compensation for their services to the Board but shall be reimbursed for expenses incidental to such service upon receipt of appropriate documentation.
- I. Board Doctor:
1. A duly licensed and practicing physician, or a physician employed by an objective medical assessment group shall be appointed by the Board for each exam. No disability retirement shall be approved by the Board without prior examination of the claimant by the Board physician or a specialist of his/her selection, on or near the expiration of the disability leave period. The Board physician shall render such other medical service as may be requested by the Board.
 2. In order to carry out the duties of this position, each physician appointed or approved by the Board is required to be knowledgeable concerning the duties, functions and general demands required of the employee being examined. The Disability Board shall furnish to the examining physician the job and/or position description of the applicant.
 3. Re-examination of any member on disability retirement shall be conducted by a Board appointed or approved physician.
- J. Board Designee: A City of Camas staff member may be appointed as an authorized designee to act on the Board's behalf for specified Board business. Any delegation of this authority shall be an agenda item and approved by a majority of the Board. This delegation shall be recorded in the minutes of the meeting.

SECTION III – MEETINGS

III. MEETINGS

- A. Meetings: Meetings will be held by the Board as necessary for the proper discharge of its duties. The location of such meeting shall be set by the Assistant who may be contacted at City Hall. Meetings will meet the requirements of RCW 42.030.060 and proper notice will be provided to members of the Board, local newspaper, and will be posted on the City's website. The Board will only consider matters set forth in the notice of the meeting.
- B. Quorum: Three (3) members of the Board constitute a quorum. A majority of the quorum may take action.
- C. Agenda: The Assistant to the Board will prepare an agenda for all meetings. Such agenda will include an item for approval of minutes of prior meetings. The agenda will be distributed prior to the meeting to Board members and will be posted on the City of Camas website, the notice board at City Hall and the notice board at the Camas Public Library.
- D. Minutes: Minutes of all meetings shall be kept by the Assistant and will be approved by the Board.
- E. ~~Executive-Closed~~ Sessions: All meetings of the Board shall be open to the public unless the Board ~~by majority vote~~, calls an executive for a closed session as authorized by RCW 42.30.140~~110~~.
- F. Hearings: The Board may hold a full hearing on any matter when deemed necessary. When the Board is conducting a hearing or considering any matter related to a hearing, it is acting in a quasi-judicial capacity; as such, it is exempt from the provisions of the Open Meetings Act, RCW 42.30.140(2), and the hearing is not open to the public.

At such hearings:

- 1. Any person testifying before the Board may have his/her attorney present.
- 2. Opportunity shall be afforded to all parties to respond and present relevant evidence and argument on all issues involved.
- 3. Unless precluded by law, information dispositions may also be made of any contested case by stipulation, agreed settlement, consent order, or default.
- 4. The record of a hearing shall include:
 - a) All pleadings, motions, intermediate rulings;
 - b) Evidence received or considered;
 - c) A statement of matters officially noticed, if any;

- d) Questions and offers of proof, objections, and ruling thereon, if any;
 - e) Prepared findings and exceptions, if any; and
 - f) Any decisions, opinion, or report by the Board.
5. All oral proceedings in a board hearing shall be recorded. A copy of the record or any part thereof shall be transcribed and furnished to any party to the hearing upon request therefore, and payment of the reasonable costs thereof.
6. Findings of fact shall be based exclusively on the evidence and on matters officially noticed.
7. The Disability Board may:
- a) Administer oaths and affirmations, examine witnesses, and receive evidence;
 - b) Issue subpoenas as provided in *Section III G. 8. a)* below;
 - c) Rule upon offers of proof and receive relevant evidence;
 - d) Take or cause depositions to be taken pursuant to rules promulgated by the Board; and,
 - e) Regulate the course of the hearing.
8. The Board may compel the attendance of a witness at any hearing as follows:
- a) The Board may issue a subpoena on its own motion or on the request of any party.
 - b) If an individual fails to obey a subpoena, or obeys a subpoena but refuses to testify when requested concerning any matter under examination or investigation at the hearing, the Board may petition the Superior Court of Clark County for enforcement of the subpoena. The petition shall be accompanied by a copy of the subpoena and proof of service, and shall set forth in what specific manner the subpoena has not been complied and shall ask for an order of the Court to compel the witness to appear and testify before the Board.

SECTION IV – APPLICATIONS

IV. APPLICATIONS

- A. Filing: Applications for disability leave, disability retirement, or payment for medical expenses shall be filed with the Assistant to the Board. The Assistant to the Board is located in City Hall.
- B. Forms: All applications shall be on forms prescribed by the Board. The forms may be obtained from the Assistant to the Board and may be revised from time to time as needed.

SECTION V – DISABILITY LEAVE

V. DISABILITY LEAVE

- A. Consideration: Following receipt of an application for disability benefits, the Board shall review all relevant information pertaining to the question of the applicant's fitness for duty, and if, in the opinion of the majority of the Board, the evidence supports the proposition that the member is unfit for duty, such member shall be granted disability leave, unless such leave is waived pursuant to RCW 41.26.120(4). In considering such application, the Board shall consider the duties of the position, and any other evidence it considers relevant.
1. *Burden of Proof*: The burden of proving the existence of a disabling condition, and whether or not the condition was incurred in line of duty, shall be upon the applicant.
 2. *Standards*: The minimum medical and health standards previously promulgated by the State retirement board for entry or re-entry into LEOFF System membership were provided only to safeguard the fiscal integrity of the pension system and are not the applicable standards for any other purpose.
 3. *Treating Physicians*: Each application shall be accompanied by a list identifying by name any physician who had been contacted within the last six months for the illness or injury for which disability is claimed. Evaluations by nurses or physician's assistants are insufficient.
 4. *Additional Information*: In the event the Board finds that insufficient information is available to make a determination, the matter may be continued to the next Board meeting. The Board shall also advise the member of the additional information needed, and of the member's obligation to provide additional information and the deadline date by which such information must be provided.
 5. *Appearance before Board*: The Board shall be authorized to demand the appearance of the member and to request the appearance of such other persons as it deems appropriate.
 6. *Doctor-Patient Privilege*: It shall be incumbent upon each member obtaining medical evaluations to be used in connection with such disability leave and subsequent evaluations, to advise each and every examining physician that such evaluation is being conducted at the direction of the Board; that any reports relating thereto are for the benefit of the Board; that the doctor-patient privilege may not be invoked with respect thereto; and that the physician may be called upon by the Board to testify as to his/her findings.
 7. *Conditional Return to Duty*: In the event the medical evidence is inconclusive, the Board may specify in written order a reasonable trial work period to determine the member's fitness for active duty. Such a conditional return to service does not entitle the member to a second six-month period of disability leave for the same disability if, based upon

this period of service, he/she is then found to still be disabled. Unless the member receives Board authorization to return to work, any return to work following an absence of 14 working days or more shall be automatically deemed a conditional return for a two-month period.

- B. Disability Leave Allowance: Disability leave allowance is not granted for any specific amount of time. Such leave may encompass a period of from one hour to a maximum of six months. During this time the member is to receive an allowance equal to his/her full monthly salary from the employer.
- C. Recuperation and Place of Recuperation: It is the intent of the Board to assure that a member, while on disability leave, shall do all in his/her power to recuperate from such disability and shall do nothing which it reasonably appears would prolong the leave or inhibit recover from such disability. Failure to comply with this section will constitute grounds for canceling disability leave.

In case the Board should want to contact the member about matters concerning the disability leave, the member's place of recuperation will be assumed to be the home or a hospital in which confined. If it is necessary for the member to be at any other place for longer than 24 hours, it will be his/her responsibility to notify the Assistant to the Board of his/her whereabouts.

- D. Obligation of the Member While on Disability Leave:
 - 1. *Treatments*: During the period of leave, the Board shall have the authority to inquire of any examining physician as to what physical, medical or therapeutic treatments might be employed to rehabilitate the applicant and, based upon such evaluation, to direct the applicant to participate in a reasonable rehabilitation program. If the applicant fails or refuses to submit to such treatments, the Board may terminate the applicant's disability benefits.
 - 2. *Member to Seek Authorization to Return to Duty*: It shall be the responsibility of each member granted disability leave to seek authorization to return to active service at the earliest possible time he/she believes he/she is fit for duty. In the event the Board finds that a member has not actively sought authorization to return to active service immediately upon cessation of disability, the Board may retroactively cancel the member's disability leave allowance for the period in question.
 - 3. *Jurisdiction of Members on Disability Leave or on Disability Retirement*: Any member who is on disability leave is under the jurisdiction of the Board for all matters pertaining to the disability, and shall not engage in any activity which is contrary to the directives of the member's or the Board's physician or which might be detrimental to the return to active service. The Board has authority to, and it may at any time in any case, cause an investigation to be made of the activities of any active member or any member retired for disability to determine whether the disability continues to exist, and may request such investigation as may be appropriate.

- E. Notification of Decision: Following approval or denial by the Disability Board of a disability leave application, the Assistant to the Board shall notify the applicant and the employer in writing of such action.

SECTION VI – DISABILITY RETIREMENT

VI. DISABILITY RETIREMENT

- A. Disability Retirement Applications: All applications for disability retirement submitted to the Board, shall bear the date the application was executed and the date the application was received by the Board. Applications for retirement should, whenever possible, be filed when the member has been on disability leave for four (4) months' time, to allow time for gathering necessary information. Application shall be accompanied by the member's physician report and any evidence the member wishes the Board to consider concerning the duty/non-duty aspect of his/her retirement. The Board will not accept an application supported by a physician's assistant or nurse practitioner.
- B. Examination: Applicants for disability retirement shall be re-examined during the fifth or sixth month of disability leave in order to determine their eligibility for disability retirement, with the following exceptions:
1. If the Board doctor assures the Board that the applicant's condition has not and will not be corrected before the end of the sixth month; or
 2. If the applicant establishes that the disabling condition will be in existence for a period of at least six (6) months and he/she voluntarily waives disability leave. No applicant will be granted a disability retirement allowance unless the conditions imposed by the subsection are met.
- C. Trial Service Period: See Rule Section V.A.7.
- D. Granting Disability Retirement: If the evidence shows to the satisfaction of the Board that the member is physically or mentally disabled from further performance of duty and that the disability has been continuous from the date of commencement of disability leave for a period of six (6) months, the Board shall enter its written decision and order, accompanied by appropriate findings of fact and conclusions of law in compliance with RCW 41.26.120. Such written decision and order with supporting documentation shall thereafter be forwarded to the Director of the Department of Retirement Systems, for review.
1. *Early Determination*: In the event a meeting of the Board precedes by no more than 40 days the date at which the full six (6) months will conclude and the evidence is clear that the disability can be expected to continue through the full six (6) month period, the Board may make a finding of six (6) months continuous disability prior to the actual conclusion of the six (6) month period, so as to eliminate unnecessary delay of receipt of retirement benefits.
 2. *Standard/Burden of Proof*: In order to qualify to receive a disability retirement allowance, the applicant will be required to prove that he or she is physically or mentally disabled to such extent that he or she is unable to discharge with average efficiency the

duty of the position held at time of discontinuance of service; provided that, no member shall be entitled to a disability retirement allowance if the appropriate authority advises that there is an available position for which the member is qualified and to which one of such grade or rank is normally assigned and the Board determines that the member is capable of discharging, with average efficiency, the duties of the position.

- E. Decision: Every order of the Board granting or denying a disability retirement allowance shall contain the following, presented in clear and concise terms:
1. *Finding of Fact* supported by evidence in the record supporting the granting or denying of the disability retirement allowance. When a disability retirement is granted, Findings of Fact shall include:
 - a) Whether or not the disability was incurred in the line of duty.
 - b) Whether or not the disability was incurred in other employment.
 - c) Dates encompassing disability leave and/or dates relating to authorized trial basis return to duty; and, in the case of return to duty on a trial basis, the factual basis for such decision.
 - d) Dates encompassing waiver of disability leave, if applicable; and that applicant established that such disability will be in existence for a period of six (6) months.
 2. *Conclusion of Law* in accordance with law on the basis of the facts in the case.
 3. *Disposition*.
- F. Distribution: A copy of the decision shall be mailed or served forthwith to the applicant and the Department of Retirement Systems. If the Board denies disability leave or disability retirement or cancels a previously granted disability leave or retirement, the applicant shall be notified immediately and advised of the right to appeal such decision or order to the Director of the Department of Retirement Systems, pursuant to RCW 41.26.200. Such notification shall be in writing and served by personal service or mail. Provided, that written notice need not be given if applicant or his or her duly authorized representative is in attendance at the meeting or hearing and is advised of decision of the right to appeal.
- G. Post-Retirement Re-Examinations: In the event a member is placed on disability retirement, the Board shall determine whether or not the member is so disabled that no possibility exists for return to duty or that there is no possibility that rehabilitation could restore the member to fitness for duty. Further, the Board may at any point subsequent to retirement make such a determination. A copy of all such determinations shall be sent to the Department of Retirement Systems. Unless the Board has made such a finding, the Assistant to the Board shall require each member who is placed on disability retirement and who is under 49.5 years of age to complete a Re-examination Evaluation Form approximately every six (6) months. The responses thereto shall be provided to the Board physician who shall advise the Board regarding whether or not an in-person re-examination might be beneficial. If the Board determines that an in-person re-examination should be conducted, it shall so order. In the event the retired member is residing at a location more than 100 miles from his/her

former place of employment, the member may be authorized to be examined by a physician in his/her immediate area, provided, however, such physician shall be first approved by the Board and prior to such evaluation the examining physician shall be apprised of the basis upon which the examination is to be conducted and the issues to be addressed in the physician's evaluation report. The retirement allowance of any member who fails to submit to medical examination as provided shall be discontinued, and in the event such refusal continues for one year, his/her retirement allowance shall be canceled. Failure of the member to affirmatively respond to the request for re-examinations shall be deemed a continued refusal. Any re-examinations under this section shall include an evaluation of what treatments might be employed to rehabilitate the member. Based upon such evaluation the Board may direct that the member participate in a reasonable rehabilitation program.

- H. Re-entry from Retirement: In the event that re-examination discloses fitness to perform duties of the rank held by the member at the time of disability retirement, the member shall be brought before the Board for hearing and further consideration of the matter prior to actual cancellation of the disability retirement allowance unless the retiree waives such hearing. Notice of such proceedings and the hearing shall comply with the requirements of RCW Chapter 34.04.

SECTION VII – MEDICAL CLAIMS

VII. MEDICAL CLAIMS

A. Medical Services are allowed whenever:

1. Any active or retired uniformed officer subject to the jurisdiction of the Disability Board and who is covered under the provisions of RCW 41.26 is sick or disabled.
2. The sickness or disability is not caused by dissipation or abuse, of which the Board shall be judge.
3. The employer shall pay reasonable charges for such active or retired employee (excluding spouses or survivors) for those necessary medical services listed below, which are not payable from some other source as provided for in Section VII, Subsection B.

Issues regarding reasonableness of charges may be resolved by referring to the maximum fees stipulated in the State Industrial Schedule WAC 296-20 through 23.

a) Hospital expenses made in the member's behalf for:

- Board and room not to exceed semi-private room rate unless private room is required by the attending physician due to the condition of the patient.
- Necessary hospital services other than board and room furnished by the hospital.

b) Fees of a physician or surgeon licensed under the provision of RCW 18.71.

c) Services provided for chiropractic and acupuncture treatment is limited to 20 visits per year per type of treatment. Services beyond the 20 visits per year must be pre-authorized by the Board.

d) An optometrist licensed under the provisions of RCW 18.53.

e) The charges of a health care provider (ie home health aide) who ordinarily resides in the member's home or is a member of a family of either the member or the member's spouse, provided, that continuous care beyond 45 days must be approved in advance by the Board, and required by a physician.

f) Legend drugs and medicines prescribed by a physician.

g) Diagnostic, x-ray and laboratory examinations.

- h) X-ray, radium and radioactive isotopes therapy.
- i) Anesthesia and oxygen.
- j) Rental or purchase of durable medical and surgical equipment as prescribed by a physician. Purchase of medical equipment requires a doctor's note or prescription and must be submitted to Medicare and secondary insurance prior to requesting reimbursement from Camas. Medicare submittal may be waived by the Administrative Services Director or the Board for extenuating circumstances.
- k) Artificial limbs, eyes, casts and splints and trusses as prescribed by a physician.
- l) Professional ambulance service when used to transport the member to or from a hospital when he or she is injured in an accident or stricken by a disease. Other transportation expenses will be considered only if such transportation is to a medical facility more than 200 miles from the member's home, is found to be medically necessary, and is approved in advance by the Board.
- m) Dental charges incurred by a member who sustains an accidental injury to teeth or dentures and who commences treatment by a legally licensed dentist within ninety (90) days after the accident. Normal wear or adjustment of dentures is not included.
- n) Nursing home confinement and/ or home health care when prescribed by a physician, provided, that any care in excess of 45 days must be approved by the Board. The Board will only approve the cost for such necessary medical services provided outside Clark County to the extent that the cost does not exceed by 10% the average cost for such care in the Clark County Washington area. Members requiring this level of care must be reevaluated by a physician semi-annually.
- o) Physical therapy by a registered physical therapist when prescribed by a physician, provided, that any continuous care in excess of 45 days must be pre-approved by the Board.
- p) Blood transfusions including the cost of blood and blood plasma not replaced by voluntary donors.
- q) Optical charges¹ only if prescribed by a licensed physician or optometrist, up to the following limits:

Examinations	\$ 70.00
Single vision lens	\$ 80.00
Blended/Bifocal	\$ 110.00
Trifocal	\$ 150.00
Progressive	\$ 180.00

¹ All lenses and coating for lenses are calculated per pair.

Frames	\$ 175.00
Coating	\$ 50.00

Contact lenses allowance up to cost of standard eyeglasses, in lieu of eyeglasses allowance. Optical payments limited to one (1) examination and one (1) pair of glasses (or contacts) each twelve (12) month period, except for replacement of glasses broken in line of duty, or additional examinations needed with doctor's statement, or glasses needed for specific medical conditions with substantiating doctor's report submitted to the Board. Charges for sunglasses, photogray lenses, or contact lenses in excess of the allowance indicated, will be paid if pre-approved by the Board and prescribed by a licensed optometrist as a medical necessity.

The Board will consider, on a case-by-case basis, requests for radial keratotomy or laser correction surgery. In considering the individual applications, the Board will evaluate the requests where an ophthalmologists or medical doctor recommends radial keratotomy or laser correction to correct a vision condition uncorrectable by any other means and would preclude the member from performing their duties with average efficiency.

- r) Hearing aids must be prescribed by a physician and pre-approved by the Board. Charges are limited to that necessary to achieve functional corrections. Pre-authorization request for hearing aids must include two estimates of providers. The Board may allow exceptions to the two estimate requirement due to extenuating circumstances on a case by case basis.

For members whose insurance pays the full cost of hearing aids, no claims need be filed with the board. For members whose insurance pays nothing or only a portion of the cost of hearing aids, the board may approve the cost/remaining cost of the lower estimate for hearing aids. For members choosing to purchase hearing aids more expensive than the lower of the two estimates referred to above, the employer will be responsible for payment of the lower estimate and the member will be responsible for the cost difference between the lower estimate and the actual cost of the hearing aids purchased.

- s) Routine physical examinations: The Disability Board will approve, as a necessary medical service, one (1) routine physical medical examination every (2) years for members over forty (40) years of age. More frequent physical examinations and such examinations for members under forty (40) years of age require prior Board approval. The board will approve the cost/remaining cost of the physical after insurance has covered their portion.
- t) Mental Health Treatment

- u) Dental Services: The City of Camas shall provide a dental plan/benefits similar to those to those provided for active employees.

B. Medical Service payments reduced by other sources:

As provided in RCW 41.26.150, the cost of medical services payable under this section will be reduced by any amount received or eligible to be received under insurance provided by, but not limited to the following: Workers' Compensation; Social Security; Medicare; insurance provided by another employer; other pension plan; or any other similar source, including amounts received or eligible to be received under insurance plans.

It is the responsibility of the claimant to ensure that all benefits payable under insurance policies, health care plans, Workers' Compensation, Medicare or any other such sources are claimed. The Disability Board will not authorize payment of claims until assurances of the above are provided to the Assistant to the Board.

C. Services outside medical coverage:

Each member must generally obtain medical services through his/her ~~prepaid~~ health care plan provider, if any. The Board will authorize payment of charges outside the member's medical coverage under the following circumstances:

- *Injury or illness* – Charges will be paid for the initial treatment in the case of life threatening emergency.
- *Unavailable services* – any charges incurred as a result of a Board direction or with the prior approval of the Board. The Board will approve such charges only if it determines the medical services to be necessary and of a type not available from the member's insurance.

D. Board may require examination by a physician of the Board's choice:

The Board may, in all cases, have the member examined at any time by a physician of the Board's choice. Refusal to submit to such examination may result in forfeiture of rights to benefits.

E. Subrogation:

Upon making payments to any member or retiree, the employer shall be subrogated to all rights of the member or retiree against any third party who may be held liable for the member's injuries to the extent necessary to recover the amount of payments made or to be made by the Board.

F. Claims Procedure:

All claims for payment of medical expenses shall be processed in the following manner:

1. Claims shall be filed with the Assistant to the Board on forms provided by the Board.
2. The claimant shall certify the claim as being true and correct and that the claimant has paid and/or is liable for payment of any amounts claimed and that the claim is not collectible from any other source.
3. Upon receipt of a copy of the completed claim form, the Assistant shall determine, where possible, any amounts which the applicant has received or may be eligible to receive from such other sources listed above, and those amounts shall be deducted to determine the net amount of the claim. All claims shall then be presented to the Board for approval.
4. The Board shall act upon all claims promptly, advising the claimant in writing of any claim that is rejected, together with a reason for rejection.
5. Following approval of a claim by the Board, the Assistant is authorized to process payment of such claim.

G. Filing Deadline:

Medical claims must be filed with the Assistant to the Board within one (1) year of the date upon which medical services were rendered or medical supplies purchased. Claims received after the deadline will not be processed and the member will be informed of such. Exceptions may be made when the filing of a claim is beyond the control of the claimant.

SECTION VIII – APPEALS

VIII. APPEALS

A. Disability Leave or Retirement Claims:

Any person feeling aggrieved by any order or determination of the Board shall have the right to appeal as provided for in RCW 41.26.200, .21~~10~~, and .22~~10~~, and .23~~0~~.

B. Claims for Medical Services:

Any person feeling aggrieved by any denial of payment of a claim for medical services by the Board, shall have the right to request the Board to reconsider its decision. ~~and the Board may grant or deny such request for reconsideration, at its discretion.~~ A request for reconsideration must be filed with the Assistant to the Board within thirty (30) days following the denial of claim by the Board. The Board will set a date and time ~~for~~for the hearing at which time the member, or designee, ~~–~~may present such evidence deemed relevant. The Board may affirm or deny such request for reconsideration, at its discretion. If the denial of claim is sustained by the Board, the member has the right ~~of judicial review of~~ appeal as provided under the rules of RCW Chapter 41.26.

C. Acceptance of Service of Judicial Process:

The Assistant to the Board or the Administrative Services Director is authorized to accept service of judicial process on behalf of the Board.

SECTION IX – RECORDS

IX. RECORDS

- A. Maintenance: The Assistant shall be responsible for maintaining the records for the Board.
- B. Disclosure: Disclosure of records will be administered by the City's Public Records Officer.