

CITY OF MILL CREEK

LEOFF 1 DISABILITY BOARD

**DISABILITY BOARD RULES, POLICIES &
REGULATIONS**

2019

Table of Contents

<u>CONTENTS</u>	<u>PAGE</u>
INTRODUCTION.....	4
PURPOSE AND AUTHORITY.....	4
SCOPE OF DISABILITY BOARD RESPONSIBILITY	4
APPLICATION OF RULES	4
ADOPTION OF RULES	4
DEFINITIONS.....	4-5
SECTION I -THE DISABILITY BOARD.....	5
1.1 Membership.....	5
1.2 Board Member Responsibilities	5
1.3 Duties of Disability Board Officers and Staff.....	5
1.4 Disability Board Meetings and Records.....	6
1.5 Conflict of Interest.....	7
1.6 Hearings.....	8
SECTION II - PROCESSING APPLICATIONS AND CLAIMS	9
2.1 Applications and Claims.....	9
2.2 Outside Districts Responsibility of Medical Claims	9
2.3 Basis of the Board’s Decision for Approval or Denial	10
2.4 Reconsideration and Appeal of a Decision Regarding Medical Claims	10
2.5 Notification of Hearing Following Appeal.....	10
2.6 Appeal of Final Decision	10
2.7 Board Appointed Physician.....	10
SECTION III - CLAIMS FOR MEDICAL SERVICES AND MEDICARE BENEFITS	10
3.1 Submitting Claims	10
3.2 Payment of Claims.....	11
3.3 Employer Subrogation Rights.....	11
3.4 Chairperson or a Quorum	11
3.5 Claims Distribution and Storage.....	11
3.6 Medicare Benefits	11
SECTION IV - MEDICAL SERVICES RESOLUTIONS	12
4.1 Services through a Prepaid Health Plan.....	12
4.2 Additional Services and Providers.....	12
4.3 Services Obtained in Excess of 6.1 and 6.2	12
4.4 Prior Approval on Services Obtained in Excess of 6.1 and 6.2	12
4.5 Out of Country Medical Expenses	12
SECTION V - MEDICAL TREATMENT, SERVICES AND PROCEDURES.....	12
5.1 Approval of Claims RCW 41.26.030 as Set Forth in RCW 41.26.150	12

5.2	Mental Health Services.....	13
5.3	Dental Expenses	13
5.4	Vision Benefits	14
5.5	Health Club LEOFF 1 Memberships	14
5.6	Substance Abuse Services.....	14
5.7	Medical Equipment and Supplies.....	14
5.8	Cosmetic and Reconstructive Surgery	15
5.9	Surgical Procedures	16
5.10	Home Health Care Services.....	16
5.11	Hospice Care	16
5.12	Long Term Care	16
5.13	Chiropractic Care.....	17
5.14	Acupuncture, Acupressure, Massage, Physical Therapy.....	17
5.15	Medications	17
5.16	Reasonable Charge.....	18
5.17	Medicare Coverage	18
SECTION VI - RECONSIDERATION OF BOARD DECISION.....		18
6.1	Procedure	18
6.2	Grounds	18
6.3	Stay.....	18
6.4	Terms.....	18
SECTION VII - AMENDMENTS		18
SECTION VIII - REVIEW		19
8.1	Periodic Review.....	19

CITY OF MILL CREEK LEOFF 1 DISABILITY BOARD RULES, POLICIES AND REGULATIONS

INTRODUCTION

PURPOSE AND AUTHORITY: The purpose of the City of Mill Creek LEOFF 1 Disability Board Rules, Policies and Regulations (Rules) is to establish uniform methods of procedure for the conduct of the business of the City of Mill Creek LEOFF 1 Disability Board (Disability Board or Board). The Disability Board was established on January 6, 2019 by Ordinance 2019-844 pursuant to the requirements and authority of RCW 41.26.110. The Disability Board exercises its powers, duties, and responsibilities under State Law, Chapter 4.08 of the Mill Creek Municipal Code (MCMC), and applicable Mill Creek policies. In the event of any irreconcilable conflict between these Rules and State law, the latter shall govern.

SCOPE OF DISABILITY BOARD RESPONSIBILITY: As of the establishment of the Disability Board, the City of Mill Creek (City) has only one eligible LEOFF 1 member, John Klei, who retired from his position as Police Chief for the City in 2000. As he is the only past or current LEOFF 1 officer in the Police Department. As the City has no fire department or firefighters, it is anticipated that the Disability Board's functions, responsibilities and scope of work will be limited solely to addressing Mr. Klei's LEOFF claims. Hereinafter in these Rules, he is the intended referent of the labels "Plan member" or "LEOFF 1 Member."

APPLICATION OF RULES: Pursuant to State and City law, these Rules shall apply to the LEOFF 1 Member, and the member shall be subject to the Rules. The member's failure to follow these Rules may subject the member to a loss of benefits otherwise due under State law and the Rules.

ADOPTION OF RULES: These Rules are adopted in 2019 by action of the Disability Board pursuant to RCW Chapter 41.26, WAC Chapter 415-104, and MCMC Chapter 4.08. Upon initial adoption, copies of the Rules will be distributed to the appropriate agencies.

DEFINITIONS:

APPLICATION: A request by a LEOFF 1 Member for Disability Board approval of disability leave or retirement.

BOARD MEMBER: A member of the Disability Board as described in Section 1.

CLAIM: A request by a LEOFF 1 Member for Disability Board approval of payment for medical services or expenses.

DRS: The State Department of Retirement Systems.

HIPAA: The Health Insurance Portability and Accountability Act (Pub. L. No. 104-191) and its implementing requirements relating to privacy and security of individually identifiable health information set out at 45 CFR Parts 160 and 164.

LEOFF 1 PLAN MEMBER or PLAN MEMBER: A law enforcement officer eligible for benefits provided under RCW Chapter 41.26, LEOFF 1 plan.

MEDICAL SERVICES: “Medical Services” are defined in RCW 41.26.030(22) to be the minimum services legally required to be furnished or authorized by the Disability Board. Medical services not listed in that section may, at the discretion of the Disability Board, be considered for authorization on a case-by-case basis.

NECESSARY MEDICAL SERVICE, MEDICALLY NECESSARY OR MEDICAL NECESSITY: And words of similar import shall mean as to services or supplies, but not be limited to, the following:

1. It is required to diagnose or treat a condition.
2. It is consistent with the symptoms or diagnosis and treatment of the condition.
3. It is the most appropriate level of service that is essential to the LEOFF 1 Member.
4. It is not primarily for the convenience of the LEOFF 1 Member, his/her physician or other provider.

The fact that a service or supply is furnished, prescribed, recommended or approved by a physician or other provider will not, of itself, make it medically necessary. A service or supply may be medically necessary in part only.

SECTION I -THE DISABILITY BOARD

1.1 Membership. The Disability Board shall consist of five (5) members as follows:

- Two members of the City Council appointed by the Mayor.
- Two active or retired City law enforcement officers who were or are commissioned, elected by vote of the LEOFF 1 Member.
- One member from the public at large residing in the City appointed by majority vote of the Disability Board.

The Disability Board members shall serve a two (2) year term and shall organize and conduct the affairs of the Disability Board in accordance with the requirements of MCMC Chapter 4.08 and this Section 1.

1.2 Board Member Responsibilities. It shall be the responsibility of each Disability Board member to timely advise the Secretary of their current mailing address, their electronic contact information, their emergency contact information, and of any conflicts they have or may appear to have in connection with their participation in the activities and duties undertaken by the Disability Board.

1.3 Duties of Disability Board Officers and Staff.

1.3.1 Chairperson. The Chairperson shall be a Disability Board member, shall preside at all meetings and/or hearings of the Disability Board and call special meetings. The Chairperson shall have the privilege of discussing all matters before the Disability Board and voting thereon except where to do so would constitute a violation of the appearance of fairness doctrine or a conflict of interest. The Chairperson shall have all the duties normally conferred by parliamentary procedures on such

officers and shall perform such other duties as may be requested by the Disability Board.

1.3.2 Chairperson Pro Tem. The Chairperson Pro Tem shall assume the duties and powers of the Chairperson in his/her absence.

1.3.3 Secretary. The Secretary shall be appointed by the City Manager from the City staff to provide administrative and records management assistance to the Disability Board. The Secretary shall not be a Disability Board member. The Secretary shall keep the minutes and all regular, adjourned and special meetings of the Disability Board. The Disability Board shall approve such minutes and copies shall be distributed to all Disability Board members. The Secretary shall prepare the agenda of regular and special meetings, shall give notice of all disability hearings, and shall draft and sign routine correspondence for the Disability Board.

1.4 Disability Board Meetings and Records.

1.4.1 Unless cancelled, regular meetings of the Disability Board shall take place at 4:30 pm on the Second Tuesday of March, July and November and shall be held at Mill Creek City Hall, regardless of whether the Disability Board chooses to meet telephonically or via video conferencing or in person, provided that in such event not less than three Disability Board members shall be present in person for such meeting. However, if the Disability Board chooses to meet telephonically or via video conferencing, the speaker phone or video must allow attending members of the Board and public, as well as Board members on the phone or video, to hear all discussion, provide testimony, and otherwise be aware of the Disability Board's steps in taking its official actions. Special meetings of the Disability Board may be held upon the call of the Chairperson, and notice of such special meeting shall be given by the Secretary in accordance with RCW 42.30.080.

1.4.2 Meetings of the Disability Board shall be subject to and open to the public in accordance with the Open Public Meetings Act, RCW Chapter 42.30 (OPMA). However, pursuant to RCW 42.30.140(2), the Disability Board shall have the right to close those portions of its meetings or hearings in which the Disability Board is deliberating upon quasi-judicial matters relating to specific request for benefits, or where the Disability Board finds that its deliberations are reasonably expected to include discussion or disclosure of sensitive personal information relating to a member when such information is subject to nondisclosure or protection under HIPPA, OPMA, or any other applicable federal, state or local law.

1.4.3 Information relating to the LEOFF 1 Member's claim or application shall be released as required by Public Records Act, RCW Chapter 42.56 (PRA), as authorized by federal law (including certain medical information disclosed to medical experts as provided herein), pursuant to court order meeting the requirements of 45 CFR 164.512(e), or upon written authorization of the LEOFF 1

Member. The affected LEOFF 1 Member shall be notified prior to release of his medical records and to whom they will be released. Upon request to the Disability Board Secretary, the LEOFF 1 Member may examine his medical/disability file during times mutually agreed with the Disability Board Secretary.

- 1.4.4 All records of the Disability Board comprise records of the City of Mill Creek and are subject to the State Public Records Act and the City's Public Records Act Rules. The Board's records shall be managed in accordance therewith and under the authority of the City's Public Records Officer. All records under the jurisdiction of the Disability Board shall be securely stored and accessible only by the Board Secretary or their designee, the Mill Creek Public Records Officer, or other person authorized by the Board.
 - 1.4.5 [Reserved]
 - 1.4.6 At no time shall anyone attending any Disability Board meeting or hearing be authorized to videotape or tape record portions thereof unless specifically authorized by vote of the Disability Board. Executive sessions of the Board are not subject to recording of any type at any time for any reason.
 - 1.4.7 Three Disability Board members shall constitute a quorum and the same shall have power to transact all business.
 - 1.4.8 The Disability Board Secretary shall confer with the Chairperson preceding each regular quarterly and special meeting and shall timely prepare and circulate an agenda to the Disability Board members prior to the meeting, and shall arrange for timely public disclosure in accordance with the OPMA.
 - 1.4.9 The Board may operate under such procedural rules as it chooses. "Robert's Rules of Order" shall guide the Disability Board where its rules or state law does not otherwise govern the proceedings. Legal counsel and assistance from the City Attorney's Office may be requested from the City Manager.
 - 1.4.10 If the Board determines that significant conflicting evidence is or has been presented on a material issue under the Board's consideration, the Disability Board shall schedule a hearing pursuant to section 1.6 and give twenty (20) days written notice thereof to all parties and, if required, to the public.
 - 1.4.11 Each Disability Board member is expected to notify the Secretary five working days prior to any scheduled meeting if that member will be unable to attend the meeting.
- 1.5 Conflict of Interest. Disability Board members are appointed officials of the City and shall perform their duties fairly, without bias, and in accordance with law, including ethics and conflict laws. Disability Board members are required to promptly disclose to the Board any personal interest in any matter brought before the Board on requiring Board

attention. Board members are expressly prohibited from taking or participating in any Board action including consideration, deliberation or decisions, or having any other involvement, relating to their personal claims or matters in which they have a personal interest that are or could be subject to actions of the Board. The Chairperson shall poll the Board at the start of each meeting as to the status of any conflicts. In addition, the following conduct is prohibited by Board members:

- 1.5.1 Engagement in any transaction or activity which is, or would to a reasonable person appear to be, in conflict with or incompatible with the proper discharge of official duties, or which impairs, or would to a reasonable person appear to impair, the Disability Board member's independence of judgment or action in the performance of official duties.
 - 1.5.2 Have a financial or other private interest, direct or indirect, in any matter upon which the Disability Board is required to consider or act in the discharge of its official duties.
 - 1.5.3 Fail to disqualify himself or herself from every action of the Board in any instance where an actual or apparent conflict occurs.
- 1.6 Hearings. The Disability Board may hold a hearing on any matter when deemed necessary. To ensure consideration by the Disability Board, all documentary evidence shall be submitted to the Secretary of the Board ten calendar days before the hearing.
- 1.6.1 The following rules shall apply at Board hearings:
 - Any person testifying before the Disability Board may have an attorney present.
 - Opportunity shall be afforded all parties to respond and present relevant evidence and argument on the issues.
 - Unless precluded by law, informal dispositions may be made of any contested case by stipulation, agreed settlement, consent order, or default.
 - The record of a hearing shall include:
 - All pleadings, motions, intermediate rulings;
 - Evidence received or considered;
 - A statement of matters officially noticed;
 - Questions and offers of proof, objections, and ruling thereon;
 - Prepared findings and exceptions, if any; and,
 - All decisions, opinions, or reports of or by the Disability Board.
 - The Board Secretary shall maintain a numbered record of all documents and exhibits presented at each hearing, and shall record all oral proceedings before the Disability Board, which shall collectively comprise the Board's hearing record. A copy of the hearing record, or any part or transcription thereof, may be made available to any party to the hearing upon request and payment of the cost of producing the same.

- Written findings of fact and conclusions shall be made and adopted by the Board on the relevant issues based exclusively on the evidence and testimony presented, including matters officially noticed.
- The Disability Board may:
 - Administer oaths and affirmations, examine witnesses, and receive evidence;
 - Issue subpoenas as provided herein;
 - Rule upon offers of proof and relevant evidence;
 - Take or cause depositions to be taken for good cause shown at the discretion of the Disability Board; and,
 - Regulate the course of the hearing.
- The Disability Board may compel the attendance of a witness at any hearing as follows:
 - The Disability Board may issue a subpoena on its own motion or on the request of any party upon the showing of good cause.
 - If an individual fails to obey a subpoena, or obeys a subpoena but refuses, without legal privilege, to testify when requested concerning any matter under examination or investigation at the hearing, the Disability Board may petition the Superior Court of Snohomish 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 with, and shall ask for an order of the Court to compel the witness to appear and testify before the Disability Board. Witnesses subpoenaed to attend such a hearing shall be paid the same fees and allowances, in the same manner and under the same conditions, as provided for witnesses in the courts of this state by RCW 2.40 and by RCW 5.56.010, as now or hereafter amended, as to the Courts. Such fees, allowances, and the costs of producing records required to be produced by the subpoena, shall be paid by the Disability Board or, by the party requesting the issuance of the subpoena.

SECTION II - PROCESSING APPLICATIONS AND CLAIMS

- 2.1 **Applications and Claims.** All applications and claims shall be submitted to the Disability Board Secretary on forms approved by the Disability Board. All material to be considered in connection with any application or claim must be submitted to the Disability Board at least ten calendar days prior to the Disability Board meeting at which such claim or application is to be considered. Material submitted after such time may be considered at the discretion of the Disability Board. Proper documentation, including but not limited to, explanation of benefits forms from insurance companies, itemized billings, etc. may be required for new claims. The Disability Board Secretary shall assure that no previous payments have been made for such claims and that they are accurate.
- 2.2 **[Reserved]**

- 2.3 Basis of the Board's Decision for Approval or Denial. The Disability Board's decision to approve or deny applications or claims will ordinarily be based on the forms and other written information submitted by the LEOFF 1 Member and on information provided to the Disability Board by its own doctors, if applicable to the situation. The Disability Board may require the LEOFF 1 Member to appear before the Disability Board before deciding on the LEOFF 1 Member's application or claim.
- 2.4 Reconsideration and Appeal of a Decision Regarding Medical Claims. Any decision of the Disability Board regarding medical claims made in the manner provided in Rule 2.3 may be appealed to the Disability Board for a hearing and/or reconsideration of its decision. Notice of such request shall be filed with the Board Secretary no more than thirty days after notification of the Disability Board's decision. See Section VI for rules concerning reconsideration by the Board.
- 2.5 Notification of Hearing Following Appeal. When the Disability Board receives a notice of appeal, a hearing shall be scheduled before the Disability Board at its next regular meeting or at a special meeting as determined by the Disability Board. The party appealing the decision shall be given at least ten days notice of the time, place, and nature of the hearing.
- 2.6 Appeal of Final Decision. The Board's final decision is appealable in accordance with RCW 41.26.200 and WAC 415-104-045. In the event a final determination of the Disability Board is not within the jurisdiction of the DRS Director, the aggrieved party may seek review of the order with the Snohomish County Superior Court within the appropriate time frame.
- 2.7 Board Appointed Physician.
- 2.7.1 A duly licensed and practicing physician or physicians shall be appointed by the Disability Board as needed. No disability retirement shall be approved by the Disability Board without prior examination of the claimant by the Disability Board doctor or a specialist of their selection, on or near the expiration of the disability leave period. The Disability Board doctor shall render such other medical service as may be requested by the Disability Board.
- 2.7.2 In order to carry out the duties of this position, each physician appointed or approved by the Disability 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.

SECTION III - CLAIMS FOR MEDICAL SERVICES AND MEDICARE BENEFITS

- 3.1 Submitting Claims. Claims for payment of medical services shall be submitted to the Disability Board after the LEOFF 1 Member has submitted the claim to his medical insurance. The LEOFF 1 Member shall submit itemized billings from the physician or

provider and explanation of benefits from the LEOFF 1 Member's medical insurance company. Payment for services shall be made to the provider unless otherwise requested by the LEOFF 1 Member. All claims for medical services provided for by these rules shall be submitted to the Disability Board within one year from the date of service, unless circumstances not within the control of the LEOFF 1 Member substantiate the necessity for late filing.

- 3.2 Payment of Claims. Payment of claims shall be reduced by any amount received or eligible to be received under Social Security, Medicare, insurance provided by another employer, pension plan, or other similar source in accordance with RCW 41.26.150(2). The Disability Board will not approve payment of medical/dental services in cases where the LEOFF 1 Member could have obtained reasonably equivalent services through a prepaid health plan. The Disability Board will decide which services are reasonably equivalent.
- 3.3 Employer Subrogation Rights. Upon making payment for authorized medical service the employer shall be subrogated to all rights of the LEOFF 1 Member against any third party who may be held liable for the LEOFF 1 Member's injuries or for the payment of the cost of medical services in connection with a LEOFF 1 Member's sickness or disability. Such subrogation shall be to the extent necessary to recover payments made to the LEOFF 1 Member by the employer.
- 3.4 Approval at Special Meetings. The chairperson or a quorum of the Disability Board may approve, at other than regular Board meetings, payment of claims provided that the required approval is time sensitive and notice thereof is given as required by the OPMA.
- 3.5 Claims Distribution and Storage. Claims for necessary medical services approved by the Board shall be summarized on a list and only the list shall be forwarded to the Finance Department of the City for payment. Supporting documentation shall be kept in a secured location in the Finance Department.
- 3.6 Medicare Benefits. The LEOFF 1 Member shall contact the Social Security Administration regarding eligibility for Medicare health insurance Parts A & B. If the LEOFF 1 Member is eligible for Medicare coverage, the LEOFF 1 Member shall obtain this insurance for medical expenses. Once the employer receives the LEOFF 1 Member's Medicare ID number, the LEOFF 1 Member's coverage is changed to a Medicare Advantage Plan.
 - 3.6.1 The employer pays for the Medicare Advantage Plan premium.
 - 3.6.2 The LEOFF 1 Member must apply for and retain Medicare Part B coverage, and is reimbursed by the Board after the LEOFF 1 Member pays the premium and submits a claim.
 - 3.6.3 Medicare Part B Provider. If the Disability Board has reimbursed the LEOFF 1 Member for his Medicare B premium, the Disability Board shall require the LEOFF 1 Member to seek medical services from a Medicare B provider unless the LEOFF

1 Member can show just cause that necessary medical treatment would not be provided, for example emergency or out of area treatment.

- 3.6.4 If the LEOFF 1 Member is eligible for Medicare coverage and does not obtain this insurance, neither the employer nor the Disability Board shall be obligated to authorize payment for medical expenses that would have otherwise been covered under Medicare. RCW 41.26.150(2).

SECTION IV - MEDICAL SERVICES RESOLUTIONS

- 4.1 Services through a Prepaid Health Plan. The LEOFF 1 Member shall obtain medical services through his prepaid health plan, if any.
- 4.2 Additional Services and Providers. The Disability Board may authorize additional services and providers on a case-by-case basis upon a showing of need by the LEOFF 1 Member. The Disability Board may, at its discretion, notify the employer of the LEOFF 1 Member's request for authorization for additional services and the employer shall be entitled to respond to that request. In making its determination whether to authorize additional services or providers, the Board shall not be bound by rules of evidence and the decision of the Board shall be final.
- 4.3 Services Obtained in Excess of 4.1 and 4.2. Medical services obtained in excess of those provided for in subsections 4.1 and 4.2 of this section shall be at the expense of the LEOFF 1 Member unless the Board in its discretion finds that compliance with subsection 4.1 and 4.2 was not possible under the circumstances or unless justice requires.
- 4.4 Prior Approval on Services Obtained in Excess of 4.1 and 4.2. If the LEOFF 1 Member is seeking medical services in excess of those provided in subsections 4.1 and 4.2; the LEOFF 1 Member must obtain prior approval from the Board to guarantee payment of such claims.
- 4.5 Out of Country Medical Expenses. Other than extreme emergency situations, all out of country medical expenses must be pre-approved by the Disability Board.

SECTION V - MEDICAL TREATMENT, SERVICES AND PROCEDURES

- 5.1 Approval of Claims RCW 41.26.030 as Set Forth in RCW 41.26.150. The Disability Board will approve payment of claims for all medical services defined in RCW 41.26.030 under the conditions set forth in RCW 41.26.150, if applicable. Whenever any retired LEOFF 1 Member, on account of service, sickness or disability, not caused or brought on by dissipation or abuse, of which the Disability Board shall be the judge, is confined in any hospital or in their home, and whether or not so confined, requires medical services, the employer shall pay for the retired LEOFF 1 Member's necessary medical services not payable from some other source as provided for in RCW 41.26.150, subsection 2.

5.2 Mental Health Services. Payment for psychological services to the LEOFF 1 Member during a continuous 12 month period will be approved only under the following conditions:

5.2.1 The Psychologist is licensed by the State of Washington pursuant to RCW 18.83 or other state whose certification requirements are, at a minimum, equivalent to the certification requirements set forth by Washington State.

5.2.2 The Psychologist submits to the Disability Board upon request an individualized treatment plan which was prepared within one (1) month of commencement of treatment. Updated treatment progress reports shall be submitted by the Psychologist every six (6) sessions in order for the Disability Board to determine whether charges for such treatment should continue to be approved for payment.

5.2.3 The above rules shall also apply to all mental health treatment provided by the Disability Board.

5.3 Dental Expenses.

5.3.1 Dental charges incurred by the LEOFF 1 Member who sustains an accidental injury to his teeth shall be paid.

5.3.2 Dental expenses incurred by the LEOFF 1 Member for teeth whitening will not be approved.

5.3.3 The Disability Board authorizes \$25.00 maximum for fluoride treatment once per year.

5.3.4 The expense of one general dental checkup each year will be covered for the LEOFF 1 Member.

5.3.5 No more than two dental cleanings each year will be covered for the LEOFF 1 Member, unless it is determined, in the discretion of the Disability Board, that a more frequent cleaning schedule is medically necessary for the LEOFF 1 Member.

5.3.6 The LEOFF 1 Member shall have at least one dental cleaning and one dental checkup each calendar year. Failure to do so shall impact reimbursement and/or authorization for other dental procedures.

5.3.7 The dental expenses incurred by the LEOFF 1 Member for routine dental and periodontal work, as may be found by the Board to be medically necessary, will be covered.

5.3.8 Dental expenses incurred by the LEOFF 1 Member for dental services or work which is purely cosmetic in nature will not be approved or paid, except in unusual circumstances, and then only with the prior written approval of the Disability Board and based upon medical necessity.

- 5.4 Vision Benefits. The Disability Board will approve payment of the expense of eye glasses prescribed by an ophthalmologist or optometrist as follows:
- 5.4.1 One eye examination per year less amount payable by insurance.
 - 5.4.2 One set of frames and lenses every two years. Cost not to exceed \$200.00 for frames and \$300.00 for lenses if purchased separately, or \$500.00 per set combined, plus tax. The \$500.00 shall be less any amount payable by some other source such as insurance.
 - 5.4.3 Lens and/or frame replacement caused by breakage or loss will only be approved if the breakage or loss occurs through no fault or negligence of the LEOFF 1 Member such as being hit, a vehicle accident, or other type of accident such as a fall, subject to approval of the Disability Board.
 - 5.4.4 Up to a two year supply of contacts every two years. Cost not to exceed \$500 plus tax.
 - 5.4.5 The LEOFF 1 Member may only receive glasses (lenses & frames) *or* contacts during a two-year period. The Disability Board will not approve payment for both.

The Disability Board, upon the receipt of related bills and medical information, may, in its discretion, review individual circumstances not covered above. Pre-approval is required if the LEOFF 1 Member needs glasses more frequently than every two years.

- 5.5 Health Club LEOFF 1 Memberships. Health Club LEOFF 1 Memberships may be approved by the Disability Board on a case-by-case basis in lieu of physical therapy for rehabilitation purposes only.
- 5.6 Substance Abuse Services. The Disability Board's policy is to provide for the treatment of substance abuse at a facility licensed by the State of Washington to provide that service, or at another state whose certification requirements are, at a minimum, equivalent to the certification requirements set forth by Washington State. The LEOFF 1 Member shall first obtain a referral from the LEOFF 1 Member's physician for the selected facility or organization, and is subject to review by a Disability Board appointed physician.
- 5.6.1 Treatment may consist of inpatient or outpatient treatment with the prior approval of the Disability Board. The LEOFF 1 Member shall obtain prior approval from the Disability Board whenever possible.
 - 5.6.2 Payment for substance abuse treatment will be subject to a maximum lifetime limit of one single course of treatment. Extenuating circumstances may be reviewed at the discretion of the Disability Board.
- 5.7 Medical Equipment and Supplies. In addition to the rental of durable equipment as provided for in RCW 41.26.030(22), the Disability Board will consider for approval claims

for the purchase of durable medical equipment and supplies under the following conditions:

5.7.1 Hearing Aids. Prior approval must be obtained from the Disability Board before the LEOFF 1 Member purchases or has a retrofit of a hearing aid device. All requests will be considered on an individual basis based on the following conditions:

- Medical examination by an otolaryngologist to rule out any treatable ear conditions;
- Hearing evaluation by a certified audiologist to include an audiogram and recommendations regarding the type of hearing aid(s);
- A statement by the evaluating audiologist, as well as a copy of the audiological evaluation, must be included in the application as proof that the LEOFF 1 Member's hearing loss is progressive, permanent and/or not likely to improve with other treatment (i.e., medication, surgery etc.);
- The fitting of hearing aid(s) shall be done only by a certified audiologist; and
- Maximum cost estimate is not to exceed \$5,000 per pair during any two year period based on the equipment of average quality and serviceability. The cost estimate shall also include at least a two year warranty on the hearing aids.

5.7.2 Replacement of Hearing Aids. The Disability Board will consider approval of payment of the LEOFF 1 Member's replacement hearing aid(s) expenses not more frequently than every two-years. However, replacement of hearing aid(s) will be approved on a case-by-case basis if the LEOFF 1 Member provides the Disability Board with documentation of the medical necessity for the replacement.

5.7.3 Repair of Hearing Aids. The LEOFF 1 Member requesting payment for repair of hearing aid(s) must document why the device(s) are no longer serviceable. **Exception:** Payment will be approved for costs of regular maintenance and batteries (at \$100/year) upon submission of appropriate expense forms.

5.7.4 Purchase of Durable Medical Equipment and Supplies. The Disability Board will review and approve or deny a request for pre-approval to purchase durable medical equipment and/or supplies based on the following conditions:

- Purchase of wheelchairs, special equipment, medical or surgical equipment, orthotics, etc. which are prescribed by a physician as medically necessary for treatment of the LEOFF 1 Member's illness or disability.
- Demonstration that the LEOFF 1 Member first submitted claims for payment for durable medical equipment and/or supplies to their health insurance provider before sending them to the Disability Board.
- The Disability Board will not approve claims for equipment or supplies that have a non-medical use or function.

5.8 Cosmetic and Reconstructive Surgery.

- 5.8.1 Sterilization;
 - 5.8.2 Cosmetic surgery or procedures, except those expenses arising from cosmetic surgery or procedures that are directly related to traumatic injury, may be covered if approved by the Board prior to being incurred by the LEOFF 1 Member.
- 5.9 Surgical Procedures. For any surgical procedure which is not performed on an emergency or urgent basis the LEOFF 1 Member shall:
- 5.9.1 Advise the Disability Board one month in advance.
 - 5.9.2 The Disability Board may elect to require the LEOFF 1 Member to see a Disability Board appointed physician for a second opinion as to the necessity for such surgical procedure.
- 5.10 Home Health Care Services. If confined to his home following an accident or illness, the LEOFF 1 Member may be eligible for home health visits for intermittent skilled nursing care if prior approval is received from the Disability Board.
- 5.11 Hospice Care. Benefits will be provided for hospice care for the terminally ill LEOFF 1 Member if the following requirements are met:
- 5.11.1 The LEOFF 1 Member is admitted to a DSHS-certified or Medicare-approved program, or the LEOFF 1 Member chooses to receive this benefit at home.
 - 5.11.2 The care provided is part of a written plan of continuous care prescribed and reviewed by a physician.
- 5.12 Long Term Care. Long-Term Care Facilities, Adult Family Homes, Boarding Home and Nursing Home. Confinement in any of the above-entitled facilities is to be provided as a minimum required service. The Disability Board will review and consider for approval placement and payment of charges for care in any of these facilities under the following conditions:
- 5.12.1 The Disability Board may utilize the services of a Care Management Organization for the purpose of organizing the most effective and appropriate long-term care. Long-term care could include elements of home health, hospice, custodial care and home nursing services;
 - 5.12.2 Placement is prescribed by a physician or advanced registered nurse practitioner;
 - 5.12.3 The facility must have obtained and remained current on Adult Family, Boarding Home or Nursing home license from the State of Washington;
 - 5.12.4 If the facility is located outside the State of Washington, it shall be the responsibility of the member to provide documentary evidence that the facility is licensed in the state or country where the facility is located and that the licensing

requirements are similar, equal to or greater than those required by the State of Washington;

- 5.12.5 If placement exceeds six months, the Disability Board shall require a treatment plan from the facility;
 - 5.12.6 If placement exceeds six months, the Disability Board shall require an updated progress report from a treating physician not less than every six months;
 - 5.12.7 If eligible for Medicare, the member has applied for or is receiving both Part A and Part B Medicare coverage, whether paid for by the employer or member;
 - 5.12.8 The provider or member's claims for payment shall be submitted directly to the member's insurance, third party payer or employer; and
 - 5.12.9 Application for prior approval of long-term care services and placement will be considered on a case-by-case basis.
- 5.13 Chiropractic Care. The Disability Board will approve up to twenty annual visits to a Chiropractor licensed by the State of Washington pursuant to RCW 18.25 or a Chiropractor in another state whose certification requirements are, at a minimum, equivalent to the certification requirement set forth by Washington State, provided the following are met:
- 5.13.1 The Disability Board receives an evaluation and treatment plan for more than four chiropractic visits within six months for the same injury, illness, or condition(s).
 - 5.13.2 The Disability Board receives a referral and documentation stating the medical necessity from the LEOFF 1 Member's physician if chiropractic visits exceed twenty per calendar year.
 - 5.13.3 Nothing shall prevent the Disability Board from extending the number of allotted chiropractic visits upon proof of medical necessity.
- 5.14 Acupuncture, Acupressure, Massage, Physical Therapy. These services shall be provided under the following conditions:
- 5.14.1 Services have been prescribed by a licensed physician stating the medical necessity.
 - 5.14.2 If treatment is to be continuous (more than four visits for the same illness or condition) an evaluation and proposed treatment plan must be submitted by the prescribing physician to the Disability Board for pre-approval.
- 5.15 Medications. Medications will only be covered when prescribed by a licensed medical provider.

5.15.1 Smoking cessation prescriptions and medication shall be limited to a 90-day lifetime maximum.

5.15.2 Sexual dysfunction and infertility prescriptions may be approved upon showing of medical necessity, and shall be limited to no more than six doses per month.

5.16 Reasonable Charge. The Board shall be responsible for determining what is reasonable.

5.17 Medicare Coverage. Where, at the LEOFF 1 Member's request the LEOFF Disability Board has paid the LEOFF 1 Member's Medicare B premium, the Disability Board shall require the LEOFF 1 Member to seek medical services from a Medicare B Provider, unless the LEOFF 1 Member can show just cause that necessary medical treatment will not be provided, such as emergency or out of the area treatment. The LEOFF 1 Member is required to sign up for Medicare Part B when eligible.

SECTION VI - RECONSIDERATION OF BOARD DECISION

6.1 Procedure. The LEOFF 1 Member or employer may petition the Board in writing to reconsider any decision made, if filed with the Secretary within thirty days of notice of the Board's decision.

6.2 Grounds. The Disability Board may reconsider its decision if one of the following grounds and adequate supporting facts are alleged:

6.2.1 Mistakes, inadvertence, surprise, excusable neglect or irregularity in making the decision;

6.2.2 Newly discovered evidence;

6.2.3 Fraud, misrepresentation, or misconduct of an adverse party;

6.2.4 The decision is void;

6.2.5 Any other reason which, in the Board discretion, justifies relief.

6.3 Stay. Pending the reconsideration, the decision of the Disability Board will be stayed. The stay shall apply until the next meeting of the Disability Board, at which time the reconsideration will be heard.

6.4 Terms. If the Disability Board finds that the motion to reconsider was frivolous, made without any arguable basis, or made in bad faith, the Disability Board may award terms for the prevailing party.

SECTION VII - AMENDMENTS

These Rules, Policies and Regulations may be amended, repealed or altered in whole or in part by the Disability Board using the following procedures: In the case of correcting typographical or scrivener's errors, or correcting or updating references to state laws, state administrative codes

or the City's municipal code, changes may be made at any time during a regular or special meeting by a simple majority vote of the Board. All other changes, including substantive changes to the Rules, shall require advance written notice to the Board by the Secretary and inclusion on the Board's agenda as an action item, and shall require a supermajority vote of 4 members for adoption.

SECTION VIII - REVIEW

8.1 Periodic Review. The Board Rules shall be reviewed and revised periodically, or as often as the Board deems necessary to assure that:

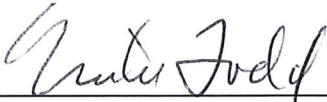
8.1.1 Provisions herein remain in conformance with Washington statutory and administrative codes and/or the City of Mill Creek Municipal Code and applicable polices.

8.1.2 The Rules reflect current philosophy and intent of the Board.

8.1.3 LEOFF 1 Member claims are subject to the last revised and adopted Rules. Any newly revised Rules, court rulings or statutes shall supersede previous Rules, court rulings or statutes and thus make obsolete any prior inconsistent Rule, court ruling or statute. Claims may not be made to apply to obsolete Rules, court rulings or statutes.

ADOPTED by the City of Mill Creek LEOFF 1 Disability Board on this 9th day of July, 2019, 2019.

MILL CREEK LEOFF 1 DISABILITY BOARD




Chair



Vice Chair



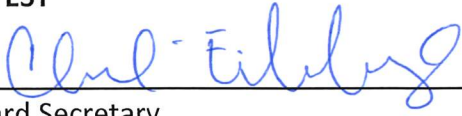
Member



Member

Member

ATTEST

A handwritten signature in blue ink, appearing to read "Carol E. Eilberg", is written over a horizontal line.

Board Secretary