



**City of Bellevue**  
**Human Resources Department**

**Date: September 29, 2015**  
**To: LEOFF 1 Disability Board members**  
**From: Paula Dillon x 7198, Human Resources**  
**RE: Tuesday, October 6, 2015 Regular Meeting**

Please review the attached Agenda packet for the upcoming LEOFF 1 Disability Board meeting on Tuesday, October 6, 2015. The meeting will be held in Room 1E-118.

Attachments

**Distribution List**

*Disability Board Members:*

Susan Neiman, Chair  
Lynne Robinson, Councilmember  
John Stokes, Councilmember  
Wayne Bergeron, Fire Department  
Bryan Reil, Police Department

*Other Copies:*

Siona Windsor, City Attorney's Office  
Kerry Sievers/Julie Howe, Human Resources  
Paula Dillon, Human Resources  
Kim McCool, Council Coordinator  
Sandra Nunnelee, Council Coordinator  
Mark Risen, Fire Department  
Steve Mylett, Police Department  
Michelle Cash, Minutes taker – without attachments



# **City of Bellevue**

## *Disability Board*

**Agenda Regular Meeting**  
**City Hall, Conference Room 1E-118**

**Date: Tuesday, October 6, 2015**

**Time: 5:30 pm Administrative Meeting**  
**6:00 pm Business Meeting**

- I. Call to Order**
- II. Roll Call**
- III. Approval of Minutes of Regular Meeting, August 4, 2015**
- IV. Consideration of Applications for Disability Allowances**
  - A. Applications for Disability Allowances**
    - 1) Fire Department**
  - B. Applications for Disability Allowances Greater than 1 month**
    - 1) Fire Department**
- V. Consideration of Medical Claims**
  - A. Routine claims**
  - B. Special claims**
  - C. Pre-Approved Recurring Long-Term Care Claims**
- VI. Staff Reports – Disability Board Annual Newsletter**
- VII. Unfinished Business**
- VIII. New Business**
- IX. Announce Date & Time of next meeting: Tuesday, November 3, 2015**
- X. Adjournment**

**CITY OF BELLEVUE  
LEOFF 1 DISABILITY BOARD  
Meeting Minutes**

August 4, 2015  
5:30 p.m. – Administration  
6:00 p.m. – Business Meeting

Conference Room 1E-118  
Bellevue City Hall

**MEMBERS PRESENT:** Chairperson Susan Neiman  
Boardmember Wayne Bergeron  
Councilmember Lynne Robinson  
Councilmember John Stokes<sup>1</sup>

**MEMBER ABSENT:** Boardmember Bryan Reil

**OTHERS PRESENT:** Paula Dillon, Human Resources  
Siona Windsor, City Attorney's Office

**MINUTES TAKER:** Michelle Cash

**I. CALL TO ORDER**

The meeting was called to order at 6:05 p.m. by Chair Neiman.

**II. ROLL CALL**

**III. APPROVAL OF MINUTES**

Approval of the meeting minutes was postponed until later in the meeting agenda.

**IV. CONSIDERATION OF APPLICATIONS FOR DISABILITY ALLOWANCES**

A. Applications for Disability Allowances

**Motion by Boardmember Bergeron and second by Councilmember Robinson to approve the Applications for Disability Allowances as presented.**

Councilmember Robinson requested additional information regarding the initial injury mechanism for Member #138. The documentation was unclear as to whether the Member was injured while walking on a treadmill or if the member was already injured and then the treadmill exacerbated the pain. The Member claimed lower back and leg pain while walking on a

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<sup>1</sup> Arrived at 6:15 p.m.

treadmill at work. Boardmembers directed staff to request additional information from the Member.

**Motion by Boardmember Bergeron and second by Councilmember Robinson to amend the motion to approve the Application for Disability Allowances as presented and approve Member #138's claim as non-duty related. At the question, motion carried unanimously (3-0) to approve the amendment to the motion.**

**At the question, motion carried unanimously (3-0) to approve the Applications for Disability Allowances. Member #138's claim was approved as non-duty related.**

B. Applications for Disability Allowances Greater than 1 month

**Motion by Boardmember Bergeron and second by Councilmember Robinson to approve the Applications for Disability Allowances Greater than 1 month as presented.**

Boardmembers requested additional information regarding the initial injury mechanism for Member #138.

**Motion by Boardmember Bergeron and second by Councilmember Robinson to amend the motion to approve the Application for Disability Allowances Greater than 1 month as presented and approve Member #138's claim as non-duty related. At the question, motion carried unanimously (3-0) to approve the amendment to the motion.**

**At the question, motion carried unanimously (3-0) to approve the Applications for Disability Allowances Greater than 1 month. Member #138's claim was approved as non-duty related.**

**V. CONSIDERATION OF MEDICAL CLAIMS**

A. Routine Claims

None.

B. Special Claims

None.

C. Pre-Approved Recurring Long-Term Care Claims

The pre-approved recurring long-term care claims were reviewed and included in the Board packet.

## **VI. STAFF REPORT**

None.

## **VII. UNFINISHED BUSINESS**

### A. Approval of Minutes

**Motion by Councilmember Stokes and second by Boardmember Bergeron to approve the July 7, 2015 LEOFF 1 Disability Board meeting minutes as presented.**

Ms. Cash made a correction to page 2, paragraph 1 of the meeting minutes. The bold font should be removed from the paragraph and the last two words of the paragraph, “(emphasis added)” should be deleted.

**At the question, motion carried unanimously (4-0) to approve the revised meeting minutes.**

### B. Member #69 Disability Leave

Ms. Windsor reminded Boardmembers that the Board took action regarding Member #69’s claim at the July 7, 2015 Board meeting. In particular, the Board passed a motion, based upon the information presented, that the Board could not reasonably conclude that the claim was duty related. Since Councilmember Robinson was unable to attend the July 7, 2015 Board meeting, she noted that she listened to a recording of the meeting, in particular the claim related to Member #69.

*Break 6:20-6:29 p.m.*

Ms. Windsor explained that on July 7, 2015 the Disability Board reconsidered its February 3, 2015 determination that Member #69’s January 16, 2015 disability leave was non-duty related. After carefully considering the further information presented to the Board on this subject at its July 7, 2015 meeting, the Board reaffirmed its earlier decision that the January 16, 2015 disability leave was non-duty related.

Boardmembers were presented with proposed Findings and Conclusions consistent with its July 7, 2015 decision for consideration and adoption.

Ms. Windsor noted that the majority of the materials submitted for consideration at the July 7, 2015 Board meeting were provided by Member #69’s attorney, rather than the Member’s physician.

**Motion by Boardmember Bergeron and second by Councilmember Stokes to adopt the proposed Findings and Conclusions reference document as presented. Motion carried unanimously (4-0).**

**VIII. NEW BUSINESS**

None.

**IX. ANNOUNCE DATE & TIME OF NEXT MEETING**

The next Disability Board meeting will be held on September 1, 2015.

**X. ADJOURNMENT**

By general consensus, the meeting was adjourned at 6:34 p.m.

**DATE:** November 5, 2015  
**TO:** LEOFF 1 Members  
**FROM:** Paula Dillon, LEOFF 1 Disability Board Staff Assistant  
**SUBJECT:** **LEOFF 1 Disability Board Eighth Annual Newsletter**

LEOFF 1 Members,

In 2007 the LEOFF 1 Disability Board requested that an annual newsletter be sent to all members. This newsletter contains information on who is on the Board, Policy updates and claims procedures.

Bellevue's LEOFF 1 Disability Board has a website. You can find us at [www.bellevuewa.gov/leoff-1-disability-board.htm](http://www.bellevuewa.gov/leoff-1-disability-board.htm) . There you will find information about meetings, Board members, policies and procedures, claims information and claim forms.

**LEOFF 1 Disability Board Members:**

Susan Neiman, Chair  
John Stokes, Councilmember  
Lynn Robinson, Councilmember  
Wayne Bergeron, Fire Department  
Bryan Reil, Police Department

Paula Dillon – Staff Assistant  
Siona Windsor – Legal Advisor

**LEOFF 1 Medical Insurance – In-Network Providers:**

We **encourage** members who are covered by Premera or an out of state Blue Cross/Shield affiliate to see in network providers unless emergency or unique circumstances make this impossible. To accomplish this, the member should contact **Premera** directly at **1-800-722-1471** to confirm the in network status of their health care provider. They may also contact the City's health care ombudsperson at **Gallagher Benefit Services** at **1-800-542-3737** to find out this information.

In certain circumstances, the Board could determine that the additional costs associated with out of network claims **are not reasonable costs**. To avoid this possibility, the Board strongly encourages members covered by Premera or a Blue Cross/Shield affiliate who believe they must see an out of network doctor to obtain pre approval from the Board for the out of network services. Please contact the Disability staff person, Paula Dillon at 425 452-7198 to obtain information on how to submit for such pre approval.

### **Long Term Care Rates for 2015**

Below are the Long Term Care Policy rates for the Puget Sound region updated for 2016. The rate cap the Board has established will be provided to you each November for the following year.

a) Assisted Living Facility	(one bedroom unit)	\$6,000/month
b) Nursing Home	(semi-private room)	\$331/day
c) Home Health Care Reimbursement	(home health aide)	\$33/hour

If you live outside the Puget Sound region, and are in need of the above services, contact the Disability Board Staff Assistant for the rates in your area.

### **Medicare Part B Enrollment:**

Remember if you are 65 or older you must be enrolled in Medicare Parts A & B. If you fail to timely sign up for Medicare part B, you will be required to pay a higher Medicare Part B Premium (called a non standard premium) for the remainder of your life. The non standard premium is an additional 10% of the standard annual Medicare premium each year beyond the age of 65 that you fail to enroll. The City will not pay the non standard premium.

### **Medicare Part B Reimbursement:**

The City will reimburse the cost of the Medicare Part B premium to LEOFF 1 members. To receive reimbursement **send a copy of your SSA 1099** documenting the Medicare Part B premiums deducted from your Social Security checks for the previous year to:

City of Bellevue  
Human Resources Department  
LEOFF 1 Administrator  
PO Box 90012  
Bellevue, WA 98009-9012

If you pay your Medicare Part B premiums by check please contact the LEOFF 1 Disability Board Staff Assistant for reimbursement instructions.

If you have questions, you can reach Paula Dillon, Disability Board Staff Assistant at (425) 452-7198 or email [pdillon@bellevuewa.gov](mailto:pdillon@bellevuewa.gov)

C. Long Term Care reimbursement

1. Policy: The Disability Board has studied how to contain escalating costs associated with Long Term Care Expenses. The LEOFF statute provides that a LEOFF 1 member is entitled to reimbursement for the medically “reasonable charges” incurred for Long Term Care (LTC). The Board has determined that it is appropriate to establish a cap on reimbursing LTC charges that represents a reasonable charge for these services. This cap is based on The Genworth Cost of care Survey, a nationally recognized survey of average costs for LTC adjusted annually in March of each year. The survey provides average costs by geographic region. For services listed in the survey the Board will reimburse up to 120% of average cost for the geographic region in which the member lives. The cap may be adjusted based on a periodic survey conducted by city staff.

2. Rates: In November of each year, members will be notified by mail of the maximum reimbursement rate for the Puget Sound region that will apply in the following year. The average daily total cost for Home Health Care that will be reimbursed shall not exceed the average daily rate for a Skilled Nursing Facility. If the member lives outside the Puget Sound region they would need to contact the Disability Board staff assistant for the rates for their area.

The maximum reimbursement for the following Long Term Care facilities are:

- |                                       |                     |
|---------------------------------------|---------------------|
| a) Assisted Living Facility *         | (one bedroom unit)  |
| b) Skilled Nursing Facility **        | (semi-private room) |
| c) Home Health Care Reimbursement *** | (home health aide)  |

3. . Exceptions: Under extraordinary circumstances the Board will consider reimbursing above the established maximum where the member can show that he or she cannot obtain the necessary medical service at the established maximum rate.



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# Compare Long Term Care Costs Across the United States

[Explore Locations](#)

[Compare Costs by Location](#)

[Calculate Future Costs](#)

## Seattle Area<sup>2</sup>, WA: Annual Care Costs in 2015

Choose the cost breakdown:  Annual

**Find your Cost of Care**  
Click or select a state to view details by location:

Choose a State:  
Washington

Choose a Location:  
Seattle Area

[Return to National View](#)

**2015 Cost of Care Overview**  
Use the information below to find out and compare the cost of care in your region. Go mobile with the [Cost of Care app from iTunes](#).



<b>Home Health Care<sup>2</sup></b>	
<b>Homemaker Services<sup>2</sup></b>	
Annual Cost	5-yr Annual Growth <sup>3</sup>
<b>\$62,920</b>	<b>2%</b>
<b>Home Health Aide<sup>2</sup></b>	
Annual Cost	5-yr Annual Growth <sup>3</sup>
<b>\$62,920</b>	<b>2%</b>

<b>Adult Day Health Care<sup>1</sup></b>
Annual Cost
<b>\$16,250</b>
5-yr Annual Growth <sup>3</sup>
<b>1%</b>

<b>Assisted Living Facility<sup>4</sup></b>
Annual Cost
<b>\$60,000</b>
5-yr Annual Growth <sup>3</sup>
<b>5%</b>

<b>Nursing Home Care<sup>2</sup></b>	
<b>Semi-Private Room<sup>5</sup></b>	
Annual Cost	5-yr Annual Growth <sup>3</sup>
<b>\$100,740</b>	<b>3%</b>
<b>Private Room<sup>5</sup></b>	
Annual Cost	5-yr Annual Growth <sup>3</sup>
<b>\$114,975</b>	<b>5%</b>

[View the survey methodology](#)

<sup>1</sup> Based on 5 days per week by 52 weeks  
<sup>2</sup> Based on 44 hours per week by 52 weeks  
<sup>3</sup> Represents the compound annual growth rate based on Genworth Cost of Care Survey  
<sup>4</sup> Based on 12 months of care, private, one bedroom  
<sup>5</sup> Based on 365 days of care



[Key Findings](#)



[Cost of Care 2015 Full Report](#)

Explore the industry's most comprehensive report on long term care costs



[Genworth R70 Age Simulation Suit](#)

Learn how this suit is helping families start "The Talk" about long term care planning.