



EDMONDS' DISABILITY BOARD
Meeting Minutes
Specially Called Meeting
3/5/2018

MEMBERS PRESENT:

Ken Jones, Chair
Gary McComas, Board Member
Jim Distelhorst, Citizen-at-Large
Dave Teitzel, Council Member
Diane Buckshnis, Council Member

STAFF PRESENT:

Mary Ann Hardie, HR Director
Emily Wagener, HR Analyst
Sharon Cates, City Attorney

MEMBERS OF THE PUBLIC PRESENT:

None

CALL TO ORDER:

Ken Jones called the meeting to order at 9:35am. He welcomed Council Member Diane Buckshnis as the newest appointment to the Board for her first meeting.

APPROVAL OF MINUTES FROM THE 2/7/2018 REGULAR MEETING

Council Member Dave Teitzel moved to approve the 2/7/2018 meeting minutes, Citizen-at-Large Jim Distelhorst seconded the motion. Council Member Buckshnis abstained from voting. Board Member Gary McComas indicated that the date listed on the minutes was incorrect (1/7/2018). The motion passed with the correction to the meeting minutes date (to 2/7/2018).

FOLLOW UP FROM THE 11/2017 SPECIAL & 2/7/18 REGULAR MEETINGS

(Current and ongoing rehabilitative care expenses for a LEOFF 1 member)

Chair Ken Jones gives a brief overview of the ongoing issue up for discussion regarding a LEOFF 1 member who is currently receiving ongoing rehabilitative care in a facility. Council Member Buckshnis indicated that she believed the policy needed to be updated. She indicated it should be a medical requirement. Council Member Dave Teitzel summarized that this member was in a serious accident and has required a high level of care ever since the accident and is unable to care for himself. Council Member Buckshnis indicated it is not the care but the ancillary charges that she disagreed with [providing reimbursement of payment for].

The Board reviewed the documentation for the additional ancillary charges (included in the next section of the meeting minutes). HR Director Mary Ann Hardie indicated the documentation was sent from the facility administrator, not the member's treating provider. HR Analyst Emily Wagener further clarified that this information was received directly prior to the meeting and was included "as is" since there was no time to follow up with the member. Council Member Teitzel clarified as to which section of the meeting agenda was being discussed. Ms. Hardie clarified that the ongoing facility care charges are *related* to the ancillary charges but are separate agenda items. The ancillary charges run from October 2017 to current for about \$682.50 per month.

The Board had further discussion regarding the current and ongoing rehabilitative care expenses. Ms. Hardie explained that the agenda packet, which contains information about 3 patient advocate services, would require no cost to the City. These would assist the member (and their family) to find an appropriate level of care as deemed medically necessary and these recommendations would be provided to the Board for final approval. Ms. Hardie further indicated that the Board will need to consider the following: (1) Will the Board use a patient advocate, (2) Is there an amount the Board will continue to approve for this member's long term care costs and (3) whether or not the ancillary charges are approved and for what period (next agenda item).

The Board further discussed the different patient advocates available to assist with the current LEOFF 1 member's situation. Council Member Buckshnis asked to confirm if the patient advocate would help to determine if the member should remain at the current care facility. Citizen-at-Large Distelhorst indicated that they would evaluate the member and attempt to find the best match for the patient which may be at an alternative facility. Council Member Buckshnis asked if the City has never used a patient advocate before and Ms. Hardie confirmed that she is not aware of the City using that service in the past. Chair Jones explained that historically, most similar situations have been handled with in-home care by professionals and/or LEOFF 1 family members and that this is a slightly evolving area for reimbursement approvals. Council Member Teitzel indicated that it is important to choose a service that will meet the medical need of the LEOFF 1 member at the most reasonable price.

Council Member Buckshnis indicated that she does agree the Board should move forward with using the patient advocate service and re-stated her interest to revise the Long Term Care Policy. Council Member Teitzel agreed that it made sense to move forward with the patient advocate service in order to ensure the best care to the member and the most efficient cost to the City. There was some discussion that followed amongst the Board regarding the available patient advocates and the benefits each of them could bring to the City's Board. Ms. Hardie recommended that the Board consider using an advocate service that is separate from the City (in the interest of avoiding a potential conflict of interest). Council Members Buckshnis and Council Member Teitzel agreed.

The Board asked if HR had a recommendation or preference and Ms. Hardie explained that "First Choice" was extremely responsive and helpful and the Board could likely expect a similar response if they selected them. Chair Jones asked if there was reimbursements currently pending for this member in regard to their current placement (at the long term care facility). Ms. Wagener indicated that, besides the ancillary charges which are pending (to be discussed in the next agenda item), the Board approved the reimbursement cost for the room rate of \$10,912 per month through February 2018. Ms. Hardie indicated that the Board may want to approve an additional 1 or 2 months of charges at the current facility while the patient advocate conducted their assessment (and given that the next Board meeting would be in April 2018).

Council Member Buckshnis made a motion to select First Choice as the patient advocate to be used in this situation. The Board agreed that future similar situations would be reviewed on a case by case basis. Council Member Teitzel seconded the motion. The motion carried.

Council Member Teitzel made a motion to approve the reimbursement of the base facility charges for the LEOFF 1 member of discussion based on medical necessity in the amount of \$10,912 each month up to and including through the end of May 2018. Council Member Buckshnis seconded the motion. The motion carried.

ADDITIONAL LIVING/NURSING CARE EXPENSES FOR CURRENT LEOFF 1 MEMBER

The Board further discussed the ancillary charges in the amount of \$682.50 per month and reviewed the documentation that was submitted by the LEOFF 1 member. As was noted above, this documentation was submitted from the facility administrator, not the medical provider. Ms. Wagener confirmed that because the information was received so close to the meeting date, HR was unable to reach back out to the member to ask for further documentation.

No motion was made by the Board to approve the reimbursement request of discussion. Ms. Hardie stated that HR would follow up with the LEOFF 1 member of discussion to request additional documentation of medical necessity from the LEOFF member's medical provider before further determination can be made.

ACUPUNCTURE REIMBURSEMENT REQUEST – CURRENT AND ONGOING

The Board reviewed a request for current and ongoing acupuncture treatment reimbursement for a LEOFF 1 member. Citizen-at-Large Jim Distelhorst explained that acupuncture has had limited evidence of past successes, depending largely on the diagnosis. His recommendation that it was important for the Board to be cautious with the approval of reimbursements for acupuncture based on medical necessity. Based on this LEOFF 1 member's condition (as explained by the provided documents) and his medical experience, Citizen-at-Large Distelhorst stated that he does not believe acupuncture would be a medically necessary procedure.

Council Member Teitzel asked if the Board has ever provided payment for acupuncture services before for a LEOFF 1 member. Ms. Hardie and Chair Jones indicated they could not recall this having occurred. Ms. Hardie clarified that it would have been covered as part of the City's insurance plan when the LEOFF 1 members were previously covered on the same plan as the City employees.

There was further discussion regarding the documentation included and whether or not it was sufficient to determine medical necessity for the requested acupuncture. The Board was in agreement that further medical documentation would be necessary.

FURTHER DISCUSSION ON GENERIC DRUG POLICY (FROM 10/31/17 MEETING)

Ms. Wagener explained that she had spoken with a representative from the RetireRX plan in regard to generic prescription costs. She explained that it was made clear that the insurance company pre-authorizes any higher-cost drugs (including brand-name) when a generic is available, for medically necessary reasons. Furthermore, the patient's doctor is required to complete paperwork as back up for their process. In the case the insurance company does not approve the higher cost drug due to insufficient medical documentation, it would not be covered under the plan and the cost would be substantially higher.

There was some discussion that followed by the Board regarding the effects of leaving the generic language in the policy and if it would still require the member to submit medical documentation. Ms. Wagener explained that the intention of the Board was to ensure that generic prescription drugs are used whenever possible and appropriate and it has been confirmed that the RX insurance is already completing this process at their level. Since the policy is to reimburse for prescription co-pays, if the brand name is approved under the RX plan, it is covered for reimbursement under the Board policy. Ms. Wagener further explained that, reviewing every submitted prescription reimbursement would be administratively burdensome to staff and is not recommended. Additionally, if a prescription not covered by insurance is sent in for reimbursement the amount is substantially higher than co-pay amounts and is flagged. The member would be followed up with about this prior to the reimbursement request moving forward to the Board for further review and approval of reimbursement.

There was no motion made by the Board to approve the updated generic prescription drug language in the prescription co-pay reimbursement policy based on the discussion.

Board Member McComas brought up the new shingles vaccine that was discussed at the specially called meeting on 2/7/2018. He indicated that a discussion with RetireRX informed him that it was covered as a tier 2 prescription. He did clarify that it did not seem they had all the details of the insurance processing for this new vaccine worked out at this time. The Board discussed that this may eventually help to resolve the policy question that came up at that last meeting by a LEOFF 1 retiree inquiring about reimbursement from the Board for the new shingles vaccine. Ms. Wagener agreed that

if the vaccine is covered under the prescription coverage, it would no longer need its own policy as it could be reimbursed as a prescription co-pay.

REVIEW OF HEARING AID POLICY

Ms. Hardie indicated that this was a follow up from a prior meeting to update the language in the policy. Council Member Buckshnis asked if the policy stated the City will pay for the cost replacement hearing aids. Ms. Hardie confirmed that it does.

Council Member McComas voiced concerns regarding the language in the policy specific to using the Costco prices in that it was restrictive and greatly limits the options members have when purchasing a hearing aid. Additionally, he explained that Costco usually has older-model hearing aids available since they contract for rates. The Board also discussed the existing policy language that indicated a Costco membership is reimbursable for a LEOFF 1 member who does not have one.

Citizen-at-Large Distelhorst explained that newer is not always better but is definitely more expensive and that using older models may not be the latest and greatest but these are proven to work consistently. Ms. Hardie indicated that the existing policy was adopted based on responses from comparator city and county Boards, not created by the Board. Ms. Hardie further clarified that members are always welcome to present alternative hearing aids to the Board for reimbursement with supporting documentation of medical necessity. In these situations, the Costco price is used as a guideline and in some cases has resulted in quotes from other providers being reduced in cost.

Council Member Buckshnis requested that the notation at the bottom of the Hearing Aid Policy (which noted bringing potential reimbursement amounts above the Costco prices to the Board for approval), be added to the main body of the policy. Citizen-at-Large Distelhorst added that it could be moved to bullet #5 to make it more visible to members.

After further discussion by the Board, Ms. Mary Ann Hardie confirmed that the Board would like to: 1) revise the current policy by capping the Costco Membership reimbursement to a Gold-Star (approximately \$60 cost) as well as, 2) moving the note regarding reimbursement requests that exceed the Costco allowance into the body of the policy. This will be brought back for review at the regularly scheduled Q2 Board meeting.

NEXT MEETING SCHEDULE

Ms. Hardie reminded the Board about the upcoming WSLEA Conference and encouraged any members of the Board who were interested in attending let HR know (in order to ensure registration prior to the deadline).

NEXT MEETING SCHEDULE

After some discussion, the Board agreed to hold the next regularly scheduled Board meeting on Friday, April 20th 2018 at 9:30am.

Chair Jones adjourned the meeting at 10:41 am.