



LEOFF I Disability Board

Approval of Case 21-5 Dental Request

Agenda Date: 7/12/2021
Agenda Item Number: 3.A
File Number:21-0710

Type: decision **Version:** 1 **Status:** Passed

Title

Approval of Case 21-5 Dental Request

Report

Issue:

Whether to approve payment for dental work for retired LEOFF 1 member in the amount of \$1,912.00

Staff Contact:

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Background:

LEOFF 1 member is requesting reimbursement for dental work in the amount of \$1,912.00 for cleaning and fillings. This request is brought to the board as the member has been reimbursed for previous dental work in 2021 up to the \$2,000 annual amount. This work has been completed.

Attachments:

Applications for payment of services (3)
Statement of Services Rendered (2)

Reference:

Section III Procedures to Receive Benefits