



LEOFF I Disability Board

Case 01-14 Hearing Aids Request

Agenda Date: 4/14/2014
Agenda Item Number: 3.A
File Number: 14-0325

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

Title
Case 01-14 Hearing Aids Request

Recommended Action

Move to decide whether or not to approve the request for hearing aids and the amount approved.

Report

Background:

The member is requesting hearing aids. He has submitted estimates from:

Marlan Ear, Nose, and Throat Center	Phonak Naida Q 90	\$5,539
Marlan Ear, Nose, and Throat Center	Phonak Naida Q 70	\$5,239
Capital ENT	Widex Super 220	\$4,800

All three products meet the required three-year warranty.

Reference:

LEOFF Disability Board Policies and Procedures (2009) Paragraph O. Hearing Aids