



# **LEOFF I Disability Board**

# Case #11-17 Dental Request

Agenda Date: 7/10/2017 Agenda Item Number: File Number:17-0731

Type: decision Version: 1 Status: Passed

#### Title

Case #11-17 Dental Request

## Report

## Issue:

Whether to approve payment for dental work for LEOFF member and for what amount.

#### **Staff Contact:**

Carl Watts, Personnel Analyst, Administrative Services Human Resources, 360.753.8305

## **Background:**

The board must decide whether or not to approve the request for dental work in the amount of \$1,281.60. The member needed a new crown for a tooth for regular food intake. The member has already used the allowable amount of \$600/year for regular dental care. This is not in accordance with LEOFF I policies and procedures because this request was not submitted in advance of the procedure.

#### Attachments:

Attachments containing protected medical information will be sent via File Transfer Protocol (FTP)

### Reference:

LEOFF Disability Board Policies and Procedures (2009) Paragraph Q, Dental Benefits.