



LEOFF I Disability Board

Case #15-18 Dental Request

Agenda Date: 12/10/2018
Agenda Item Number: 4.A
File Number: 18-1179

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

Title

Case #15-18 Dental Request

Report

Issue:

Whether or not to approve payment for one or two dental implants for LEOFF member and for what amount.

Staff Contact:

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Background:

The member is requesting preapproval from the board for dental work in the amount of \$4,284.00. The member had a broken tooth which was non restorable and was extracted. The implants are recommended to replace the tooth which would allow for better food breakdown, digestion and continued health. The cost of the procedure exceeds the allowable amount of \$600/year for regular dental care. This is in accordance with LEOFF I policies and procedures. The LEOFF member has not completed this procedure yet.

Attachments:

Application for payment of services and provider treatment plan

Reference:

LEOFF Disability Board Policies and Procedures (2018) Section H, Dental Benefits