

INDEX

87/1	POLICY MANUAL
87/2	MEETINGS
87/3	MEDICARE SUPPLEMENT B
87/4	DENTAL
87/5	EYE CARE
87/6	DELETED – JULY 15, 1997
88/7	HEARING AIDS
89/8	DEPENDANT CONTINUING MEDICAL COVERAGE
89/9	DELETED
89/10	REIMBURSEMENT FOR COUNSELLING
90/11	FIRST INCREASE IN RETIREMENT ALLOWANCES
90/12	PERIOD COVERED BY PENSION PAYMENT
90/13	LOD RETIREMENT CONVERTS TO A WIDOW'S PENSION
91/14	HOME CARE REIMBURSEMENT
91/15	CLAIMS FOR PAYMENT OF NECESSARY MEDICAL SERVICES
97/16	ALTERNATIVE AND HOLISTIC MEDICINE
98/17	NURSING HOME REIMBURSEMENT
99/18	CHEMICAL DEPENDENCY TREATMENT
04/19	FORMULARY OVER THE COUNTER PRESCRIPTION DRUGS
06/20	HONOR GUARD

POLICY MANUAL 41.18 PENSION SYSTEM

POLICY 87/1 - POLICY MANUAL

The Board does hereby establish a Policy Manual to give guidance to Spokane Valley Fire Department on the administration of the Pension System, R.C.W. 41.18.

This Policy Manual will cover such matters as the Board deems appropriate and is intended to be consistent with the provisions of R.C.W. 41.18. It will cover such matters as the maintenance of records, the minutes of the Board, the time and location of regular meetings of the Board and the payment of benefits as interpreted by the Pension Board.

The Pension Policy Manual will be maintained by the Department. A copy of the Policy Manual will be furnished to each member of 41.18 and any policy updates will be sent out as they occur.

APPROVED AND ADOPTED BY THE
PENSION BOARD DECEMBER 15, 1987
AMENDED AUGUST 20, 1996
REVIEWED JULY 20, 1999
AMENDED MAY 19, 2009

POLICY MANUAL

41.18 PENSION SYSTEM

POLICY 87/2 - MEETINGS

The regular meetings of the 41.18 Pension Board will be on the 2nd to the last Tuesday of each month at 9:00 A.M., at Fire Station #8, 2110 N. Wilbur, Spokane Valley, WA 99206.

Meeting dates, times, and locations are subject to change at the discretion of the Board.

APPROVED AND ADOPTED BY THE
PENSION BOARD
DECEMBER 15, 1987
REVIEWED AUGUST 20, 1996
REVIEWED JULY 20, 1999
AMENDED OCTOBER 19, 2004
AMENDED MAY 19, 2009

**POLICY MANUAL
41.18 PENSION SYSTEM**

POLICY 87/3 - MEDICARE SUPPLEMENT B

A copy of the member's current Medical Supplement B card must be filed annually with the Fire Department's Administrative office.

APPROVED AND ADOPTED BY THE
PENSION BOARD JANUARY 19, 1988
AMENDED AUGUST 20, 1996
REVIEWED JULY 20, 1999
REVIEWED May 21, 2002
AMENDED JUNE 18, 2002
APPROVED AND ADOPTED BY THE
PENSION BOARD JULY 18, 2002
REVIEWED MAY 19, 2009

POLICY MANUAL

41.18 PENSION SYSTEM

POLICY 87/4 - DENTAL

It is the intention of the Board to be consistent with R.C.W. 41.26.030, and the Attorney General's Opinion, AGO 85-7 with respect to dental care.

The Board will pay or reimburse for dental care for those incidents of accidental injuries providing treatment is commenced by a legally licensed dentist within ninety days after the accident.

The Board will pay or reimburse for dental surgery.

The 41.18 Pension Board will pay or reimburse dental treatment required by a licensed medical Doctor in preparation for a covered medical procedure. Prior approval by the Board is required.

APPROVED AND ADOPTED BY THE
PENSION BOARD DECEMBER 15, 1987
REVIEWED OCTOBER 19, 1993
AMENDED SEPTEMBER 24, 1996
APPROVED AND ADOPTED BY THE
PENSION BOARD OCTOBER 15, 1996
REVIEWED JULY 20, 1999
REVIEWED MAY 21, 2002
AMENDED JUNE 18, 2002
APPROVED AND ADOPTED BY THE
PENSION BOARD JUNE 18, 2002
REVIEWED MAY 19, 2009

POLICY MANUAL

41.18 PENSION SYSTEM

POLICY 87/5 - EYE CARE

It is the intention of the Pension Board to be consistent with the law and the Department in matters of eye coverage for its members.

The Board will authorize reimbursement for eye care under the following schedule. All, or a portion of these costs will be covered by accessing the medical policy that is in place within the Department at the time of the billing.

NON-MEDICARE

- A. One (1) eye exam per calendar year (Jan. 1 – Dec. 31) as allowed by the current insurance provider.
- B. One (1) set prescription lenses and/or frames every year up to the amount of \$150.00 as allowed by the current insurance provider.

MEDICARE

- A. One (1) eye exam per calendar year (Jan. 1 – Dec. 31); paid by the Pension Board. Routine exams are not covered by Medicare.
- B. One (1) set prescription lenses and/or frames every year up to the amount of \$150.00; paid by Pension Board. Vision hardware is not covered by Medicare.

NON-MEDICARE/ MEDICARE

- A. Lasik surgery and other corrective procedures are generally considered an elective procedure; however, they will be considered for reimbursement when substantial medical proof is provided to the Pension Board which would indicate Lasik surgery and other surgical procedures are the only option for adequate vision or for the safety of the individual.
Provided, however, that the individual acknowledges in writing that there is no guarantee that such an elective procedure will result in improved vision and that the Pension Board and the Employer shall not be held responsible for the results of such elective surgery.

POLICY 87/5 – EYE CARE
PAGE #2

APPROVED AND ADOPTED BY THE
PENSION BOARD FEBRUARY 16, 1988
AMENDED SEPTEMBER 16, 1991
REVIEWED NOVEMBER 16, 1993
AMENDED SEPTEMBER 24, 1996
APPROVED AND ADOPTED BY THE
PENSION BOARD OCTOBER 15, 1996
REVIEWED AUGUST 24, 1999
AMENDED SEPTEMBER 21, 2004
AMENDED APRIL 18, 2006
AMENDED MAY 19, 2009

POLICY MANUAL

41.18 PENSION SYSTEM

POLICY 88/7 - HEARING AIDS

In accordance with RCW 41.18.020, the Pension Board hereby authorizes the following policy for hearing aids:

- A. The 41.18 Pension Board will consider fees and/or charges for hearing aids when it receives written documentation of an examination by a licensed otolaryngologist (ear nose and throat specialist) as to the medical requirements of the hearing disorder. Before approving payment of a member's first hearing aid this examination must have taken place within the last six (6) months. Thereafter an examination by a licensed otolaryngologist (ear nose and throat specialist) is required every six (6) years. The Board also requires that the member be examined by a licensed hearing aid dispenser who will recommend the proper type aid. The member should understand that only a licensed hearing aid dispenser can dispense hearing aids. A list of recommended hearing aid establishments will be available from the Board. The member will provide the Board with bids from three (3) licensed hearing aid dispensers for the recommended aid or aids. Bids must be dated within two months prior to being submitted to the Board for action. The 41.18 Pension Board may approve one of the three bids. If the member wishes to choose a different aid from the one that is recommended by the licensed hearing aid dispenser he will pay the difference in price.

- B. Once the Board has approved a request for a hearing aid or aids for the member, no member shall be entitled to a replacement aid or aids for a period of three (3) years from the date of initial approval. Upon the submission of documented evidence from a licensed hearing aid dispenser indicating a significant change in hearing, the member may provide three (3) bids as required and the Board again will approve one of the three bids. An approval to the member's hearing must be documented. It is the intent of the Board that its members be satisfied. The 41.18 Pension Board will not pay for a hearing aid or aids until after a thirty (30) day trial period in which the member is satisfied and furnishes the Pension Board with an "Affidavit of Approval" signed by the member. A simple signed and dated statement from the member stating his approval of the performance of the hearing aid or aids will suffice. Upon receipt of this document the Board will submit payment.

POLICY 88/7 - HEARING AIDS
PAGE #2

- C. Battery replacement: The annual allowance for battery replacement shall not exceed \$75.00.
- D. Repair of hearing aids: Repair or replacement is at the sole discretion of the 41.18 Pension Board.
- E. The 41.18 Pension Board may approve, on a case by case basis, any request for repair or replacement of a hearing aid or aids. If cost of repair is greater than the replacement cost, the Board at its discretion may approve repair or replacement. If the member has special circumstances they shall be considered by the Board. Provided however any approval shall be at the 41.18 Pension Board's sole discretion.

All, or a portion, of these costs may be covered by accessing the medical policy that is in place within the Fire Department at the time of billing.

APPROVED AND ADOPTED BY THE
PENSION BOARD JUNE 22, 1988
AMENDED OCTOBER 18, 1988
AMENDED OCTOBER 17, 1989
AMENDED APRIL 16, 1991
AMENDED JULY 16, 1991
AMENDED FEBRUARY 15, 1994
AMENDED AUGUST 20, 1996
REVIEWED AUGUST 24, 1999
AMENDED JULY 22, 2003
AMENDED JUNE 22, 2004
AMENDED JULY 18, 2006
AMENDED JUNE 23, 2009

POLICY MANUAL

41.18 PENSION SYSTEM

POLICY 89/8 - DEPENDANT CONTINUING MEDICAL COVERAGE

It is the intention of the Pension Board to provide continuation of medical coverage to a surviving Dependent spouse and Dependent children of a Retiree, provided the Retiree, surviving Dependent spouse and Dependent children of a Retiree were covered under a plan offered by the Employer on the date of the Retiree's death. The Department may only offer such coverage subject to the most current State laws, insurance company regulations, and sound underwriting practices. Coverage will be subordinate to Medicare and Medicaid coverage.

The Board does, hereby, authorize and direct that the option of continuing medical coverage under the Fire Department's group medical plan be offered to the surviving spouses of employees covered under the 41.18 Pension System, in so far as such option is available under one or more of the medical plans offered to employees and retirees of the Fire Department. The premiums for this coverage are to be paid by the survivor consistent with the rules of the Department for coverage under the group medical policy.

It shall be the duty of the Secretary of this Board, upon notification of the death of a member of the Pension System, to advise the surviving spouse of this benefit. The Secretary will notify the Pension Administrative Assistant who will inform the surviving spouse of the associated premium for this coverage and the procedures necessary to enroll.

It shall be the responsibility of the surviving spouse to advise the Department whether or not coverage is requested and, further, it shall be the responsibility of the surviving spouse to make payments in a timely manner through the Department for coverage under the medical plan.

APPROVED AND ADOPTED BY THE
PENSION BOARD FEBRUARY 21, 1989
REVIEWED OCTOBER 15, 1996
REVISED MAY 15, 2007
AMENDED JUNE 23, 2009

POLICY MANUAL

41.18 PENSION SYSTEM

POLICY 89/10 - REIMBURSEMENT FOR COUNSELLING

It will be the policy of the 41.18 Pension System to reimburse members of the Pension System for counselling by a licensed counselor or medical doctor up to the amount of \$500.00 in excess of what the Department's insurance policy will pay per calendar year.

Any amount over the amount of \$500.00 must have prior approval by the Board, and members are encouraged to attend a Board meeting to preclude any possible interruption of benefits. Exceptions will be emergency care which will be treated on a case by case basis. This policy is not intended to be an additional benefit to Policy 99/18 – Chemical Dependency Treatment.

APPROVED AND ADOPTED BY THE
PENSION BOARD JUNE 19, 1989
REVIEWED OCTOBER 15, 1996
REVIEWED AND ADOPTED JANUARY 21, 1997
REVIEWED AUGUST 24, 1999
AMENDED SEPTEMBER 21, 1999
AMENDED JUNE 23, 2009

POLICY MANUAL

41.18 PENSION SYSTEM

POLICY 90/11 - FIRST INCREASE IN RETIREMENT ALLOWANCES

It is the intention of the Board to be consistent with R. C. W. 41.26 with respect to retirement payment increases for disablement not in the line of duty (NLOD) retirees.

Retiree must be retired more than one full year before cost of living adjustment is made in retirement allowance.

APPROVED AND ADOPTED BY THE
PENSION BOARD MARCH 20, 1990
REVIEWED JULY 19, 1994
REVIEWED AND ADOPTED NOVEMBER 19, 1996
REVIEWED SEPTEMBER 21, 1999
REVIEWED JUNE 23, 2009

POLICY MANUAL 41.18 PENSION SYSTEM

POLICY 90/12 - PERIOD COVERED BY PENSION PAYMENT

This policy establishes the period for which the payment of a pension benefit is made.

The vouchers are authorized, the checks written and mailed during the later part of month for the pension payment of the subsequent month. Normally those checks would be received by the retiree in the first week or early part of the month. In effect the pension payment is made in advance of the period for which it is paid.

The last payment made to a retiree; in the event of his death will be for the month in which he died. That check will be the property of the widow or the estate.

In reference to the first payment to a retiree, the Pension Board will pro-rate the first month's payment by dividing a total month by 30 and paying the retiree the number of days he was on retirement during that month times 1/30 of the month's retirement allowance.

APPROVED AND ADOPTED BY THE
PENSION BOARD APRIL 17, 1990
REVIEWED AND ADOPTED
NOVEMBER 19, 1996
REVIEWED SEPTEMBER 21, 1999
REVIEWED JUNE 23, 2009

**POLICY MANUAL
41.18 PENSION SYSTEM**

POLICY 90/13 - LOD RETIREMENT CONVERTS TO A WIDOW'S PENSION

It is the intention of the Board to be consistent with R. C. W. 41.18.040 and 41.18.104 with respect to widow's pension increases.

This policy establishes when the first cost of living increase occurs in the widow's benefits for a retired LOD firefighter who dies.

If the firefighter dies prior to March 31st there would be no salary adjustment payable subsequent to July 1st of the following year as stated in RCW 41.18.104.

APPROVED AND ADOPTED BY THE
PENSION BOARD MAY 15, 1990
REVIEWED AND ADOPTED
NOVEMBER 19, 1996
APPROVED AND ADOPTED BY THE
PENSION BOARD MARCH 18, 1997
REVIEWED JULY 21, 2009

POLICY MANUAL

41.18 PENSION SYSTEM

POLICY 91/14 - HOME CARE REIMBURSEMENT

This policy establishes the amount that will be authorized for reimbursement to retirees needing home care in lieu of nursing home confinement.

The Board will reimburse a retiree for home care at the actual cost not to exceed the amount contracted for nursing home care at the State Medicaid rate. The Medicaid rate is to be reviewed annually.

Requests for home care reimbursement will be subject to the Board's review and approval on an individual basis. Approval of home care reimbursement will be based on medical necessity determined by a physician and/or needed assistance with activities of daily living, i.e. bathing, dressing, eating, toileting, continence and cognitive impairment.

Continuation of home health reimbursement will be subject to review by the Board on an as needed basis.

APPROVED AND ADOPTED BY THE
PENSION BOARD AUGUST 24, 1993
AMENDED NOVEMBER 15, 1994
AMENDED MARCH 18, 1997
APPROVED AND ADOPTED BY THE
PENSION BOARD FEBRUARY 17, 1998
REVIEWED SEPTEMBER 21, 1999
REVIEWED JULY 21, 2009

POLICY MANUAL 41.18 PENSION SYSTEM

POLICY 91/15 - CLAIMS FOR PAYMENT OF NECESSARY MEDICAL SERVICES

It is the intention of the Board to be in compliance with Pension Law, RCW 41.16, 41.18, 41.26 and all established procedures and past practices. It is also the Board's intention to handle all claims in as timely a manner as possible.

Submit all medical bills to the primary insurance carrier.

The Explanation of Benefits (EOB) is sent to the patient by the insurance carrier. If there is a balance due, the patient submits the EOB and provider billing to SVFD. The Administrative Assistant handling Pension will contact United Healthcare for clarification. Any balances are the responsibility of the patient. Payments can be submitted to the Board for consideration of reimbursement.

PROCEDURES REQUIRING PRIOR APPROVAL: For payment of any procedures requiring prior approval by the Board, the member can present his request directly to the Board or submit a letter with all applicable information included.

The member always has the right to present a claim directly to the Board regarding any question with payment.

APPROVED AND ADOPTED BY THE
PENSION BOARD AUGUST 20, 1991
APPROVED AND ADOPTED BY THE
PENSION BOARD JULY 15, 1997
REVISED SEPTEMBER 23, 1997
REVIEWED SEPTEMBER 21, 1999
REVISED DECEMBER 19, 2006
AMENDED JULY 21, 2009

POLICY MANUAL 41.18 PENSION SYSTEM

POLICY 97/16 - ALTERNATIVE AND HOLISTIC MEDICINE

The Board intends to be consistent with RCW 41.16, 41.18, 41.26, established procedures and past practices in providing "necessary medical services" to its members.

The Board also understands that by Washington State Law ESHB 1046, the departments' health care carriers must provide access to every category of licensed health care. This includes but is not limited to the following categories.

SHIATSU
NATUROPATH
MASSAGE THERAPY

ACUPUNCTURE
CHIROPRACTIC
CHELATION

The Board further understands that in accordance with State Law ESHB 1046, that as long as the members of the 41.18 Pension System receive medical coverage from any health care carrier under contract with the Spokane Valley Fire Department, its members must by law be given access to all categories of health care.

Therefore, the Board requires members to use the primary medical insurance policy first after which the Board will accept those claims from licensed providers of these alternative and holistic services.

Providers must be licensed and practicing.

The alternative service must be a necessary medical service that is part of a treatment plan.

The member may be asked to bring before the Board a treatment plan containing the following:

1. A diagnosis of the problem.
2. What benefits he hopes to achieve.
3. What is the ultimate goal of the treatment plan.
4. How will the goal be accomplished.

POLICY 97/16 - ALTERNATIVE AND HOLISTIC MEDICINE
PAGE #2

Note: Massage therapists are restricted by the scope of their license from diagnosing. A physician must complete a prescription prior to such services.

Acceptance of these claims is based entirely on diagnosis and treatment, as long as the provider renders such service for the diagnosis within the scope of his/her license.

Having voted that chelation therapy shall be a reimbursable medical expense and realizing that such therapy is still of a somewhat controversial nature within the general medical community, the 41.18 Pension Board does reserve the right to make certain requests of the administering medical doctor and the retiree or active duty firefighter making a request for coverage of this procedure.

Henceforth, the 41.18 Pension Board will request submission to it of:

1. A copy of the medical prescription.
2. A copy of the treatment plan.
3. From time to time a review by the medical doctor submitted to the 41.18 Pension Board every 90 days.

APPROVED AND ADOPTED BY THE
PENSION BOARD JULY 15, 1997
REVIEWED AND ADOPTED BY THE
PENSION BOARD APRIL 21, 1998
AMENDED AUGUST 18, 2009

POLICY MANUAL

41.18 PENSION SYSTEM

POLICY 98/17 – NURSING HOME REIMBURSEMENT

It is the intent of this Board to be in compliance with RCW 41:18 to reimburse retirees requiring nursing home confinement.

Eligibility of nursing home coverage shall commence upon a physician's statement that confinement in a nursing facility, with skilled nursing care, is a medical necessity.

It shall be the policy of the Board to reimburse nursing home expense at a rate negotiated by the 41.18 Pension Board at a nursing facility that shall furnish the quality of service needed and reasonably consider the convenience to the retiree.

It is the intent of this Board to access benefits under Medicare as well as Nursing Home Insurance policies in effect on an individual basis.

APPROVED AND ADOPTED BY THE
PENSION BOARD FEBRUARY 17, 1998
REVIEWED AND ADOPTED BY THE
PENSION BOARD FEBRUARY 15, 2005
REVIEWED JULY 21, 2009

POLICY MANUAL

41.18 PENSION SYSTEM

POLICY 99/18 - CHEMICAL DEPENDENCY TREATMENT

Expenses, fees, and/or charges for participation in a treatment program for chemical dependency.

"Chemical dependency" means alcoholism or drug addiction or dependency on alcohol, and one or more psychoactive chemicals.

"Alcoholism" means a disease characterized by a dependency on alcoholic beverages, loss of control over the amount and circumstances of use, symptoms of tolerance, physiological or psychological withdrawal, or both, if use is reduced or discontinued, and impairment of health or disruption of social or economic function.

"Drug addiction" means a disease characterized by a dependency on psychoactive chemicals, loss of control over the amount and circumstances of use, symptoms of tolerance, physiological or psychological withdrawal, or both, if use is reduced or discontinued, and impairment of health or disruption of social or economic function.

"Treatment Program" means an organization, institution, or corporation, public or private, engaged in the case, treatment, or rehabilitation of alcoholics or other drug addicts.

"Treatment" means the broad range of emergency detoxification, residential and out-patient services and care, including diagnostic evaluation, chemical dependency education and counseling, medical, psychiatric, psychological, and social service care, vocational rehabilitation and career counseling.

Provided, however, an employer shall not be liable for expenses, fees, and/or charges incurred for any member's chemical dependency treatment exceeding \$5,000 in any two (2) year time frame or a total expenditure of \$10,000 in a member's lifetime. The two year time frame shall be calculated from the first day treatment is received by the member.

APPROVED AND ADOPTED BY THE
PENSION BOARD JULY 20, 1999
REVIEWED JULY 21, 2009

**POLICY MANUAL
41.18 PENSION SYSTEM**

POLICY 04/19 – FORMULARY OVER THE COUNTER PRESCRIPTION DRUGS

The 41.18 Pension Board will compensate its members for “formulary” over the counter drugs prescribed by a licensed medical doctor.

APPROVED AND ADOPTED BY THE
PENSION BOARD OCTOBER 19, 2004
AMENDED JULY 21, 2009

POLICY MANUAL

41.18 PENSION SYSTEM

POLICY 06/20 – HONOR GUARD

The Honor Guard may provide a level 3 funeral for a non-job-related death of a retired employee. It would include:

- American Flag Ceremony*
- Bagpipes and Drums
- Bugler*
- Color Guard*
- Dept. Personnel Processional
- Honor Guard
- Pallbearers, Honorary Honor Guard
- Walkthrough
- Wreath Placement Unit
- Member Corridor Level 2
- Honor Guard Greeters/Reception

*The asterisked entries are for Veterans only (if not provided for by representatives of the Armed Services, DAV or VFW).

The Honor Guard may provide a level 5 funeral - Bagpipes and Drums with additional items for Veterans (if not provided for by representatives of the Armed Services, DAV or VFW), for a Spokane Valley Fire Department retired member's spouse/significant other or immediate family.

APPROVED AND ADOPTED BY THE
PENSION BOARD
DECEMBER 19, 2006
AMENDED JULY 21, 2009