Agenda
Police Pension Board Regular Meeting
Tuesday, September 16, 2025 ~ 8:15 AM
Richland City Hall ~ Parkway Conference Room
625 Swift Boulevard

Police Pension Board Regular Meeting No. 794

Call to Order

Attendance

Presentations

None.

Public Comments

Minutes: (Approve by Motion)

1. Approval of the August 19, 2025 Police Pension Board Regular Meeting Minutes
   - Jennifer Rogers, Police Pension Board Secretary

Financial Reports and Investments: (Approve to Accept and File by Motion)

2. August 2025 Preliminary Financial Statements
   - Brandon Allen, Finance Director

Medical/Dental/Vision/Medicare/Other Claims: (Approve by Motion)

3. September 2025 Medical/Dental/Vision/Other Claims
   - Jennifer Rogers, Police Pension Board Secretary

Business Items

4. Pensioner Hearing Aid Reimbursement Request - $6,250

Board Member Comments

Adjournment: (Motion to Adjourn)

Richland City Hall is ADA accessible. Any individual who has difficulty attending the meeting in-person may request to provide comments remotely. (Ch. 42.30 RCW) Requests for sign interpreters, audio equipment, and/or other special services must be received 48 hours prior to the meeting by calling the City Clerk's Office at 509-942-7389.

Minutes
Police Pension Board Regular Meeting
Tuesday, August 19, 2025 - 8:15 AM
Richland City Hall ~ Parkway Conference Room
625 Swift Boulevard

Police Pension Board Regular Meeting No. 793

Mayor Richardson called the meeting to order at 8:15 a.m.

Attendance:	Mayor Richardson	Present
	Finance Director Allen	Present
	Police Representative Carper	Present
	Police Representative Moore	Present
	Police Representative Tanner	Present
	Police Pension Board Secretary Rogers	Present

Presentations

None.

Public Comments

None.

Minutes

1. Approval of July 15, 2025 Police Pension Board Regular Meeting Minutes

MR. TANNER MOVED AND MR. MOORE SECONDED THE MOTION TO APPROVE THE JULY 15, 2025 MEETING MINUTES AS PRESENTED. MOTION CARRIED 6-0.

Financial Reports and Investments

2. July 2025 Preliminary Financial Statements

Finance Director Allen reviewed the preliminary July financials and noted that year-to-date spending is just under 50% of budget. There were no questions from the Board.

MR. MOORE MOVED AND MR. CARPER SECONDED THE MOTION TO RECEIVE AND PLACE ON FILE THE JULY 2025 PRELIMINARY FINANCIAL STATEMENTS AS PRESENTED. MOTION CARRIED 6-0.

3. August 2025 Medical/Dental/Vision/Medicare/Other Claims

Police Pension Board Secretary Rogers reported that two (2) pensioners submitted seven (7) claims during the past month. All claims were routine and providers were in-network.

FINANCE DIRECTOR ALLEN MOVED AND MR. CARPER SECONDED THE MOTION TO APPROVE THE AUGUST 2025 MEDICAL/DENTAL/VISION/OTHER CLAIMS AS PRESENTED. MOTION CARRIED 6-0.

Business Items

None.

Board Member Comments

Police Pension Board Secretary Rogers provided information regarding P3 and P14's latest reimbursement claims for discussion only.

P3 (Memory Care Facility)

P3, who previously resided in a memory care facility, passed away on July 7, 2025. The memory care facility invoiced for 17 days of room charges as the family required that amount of time to clear the apartment.

Per the facility's Residential Lease and Service Agreement, *[I]n the event of a resident's death, the rent will continue to be charged until the resident's belongings have been removed, but no longer than 7 days.*

Efforts to finalize the last invoice for the Board's consideration has been ongoing as the facility invoiced the family beyond the contract limit.

Discussion was held on whether the Board should establish a policy for post-death billing or whether cases should be decided on a case-by-case basis. Police Pension Board Secretary Rogers reminded the Board that RCW 41.26 outlines the City's basic obligation to pay for necessary medical services. Concerns were raised about fairness, compassion for families during this difficult time, and the Board's legal authority to pay beyond medically necessary services.

No decision was made, and the issue will be revisited once the final invoice and reimbursement details with the family are finalized.

P14 (Assisted Living Facility)

P14, who is currently residing in an assisted living facility, submitted a reimbursement claim for the months of April, May and June. The invoice for all three (3) months reflects different amounts. Police Pension Board Secretary Rogers stated that despite repeated requests, itemized invoices for the reimbursement claim have not been received. Further clarification has been requested, and P14 is also attempting to obtain details directly from

the facility.

No decision was made, and the issue will be revisited once billing details are finalized.

Collective Bargaining Agreement (CBA)

Finance Director Allen reported that the command staff group's new Collective Bargaining Agreement (CBA) was scheduled to go before Council for approval during the City Council meeting to be held later that evening. Once approved, adjustments will be made for those tied to the contract, including retroactive payments. The changes will also apply to commanders, with updated rates to be presented at the next Board meeting.

It was also noted that the captain positions were reclassified as commanders, and the commanders and lieutenants are also unionized. The CBA agreement will now dictate payments for retired commanders.

Member Support System

Mr. Tanner led a discussion regarding the challenges aging pensioners and their spouses may be facing in managing their affairs, particularly as they lose support systems. Members discussed the need to identify available services or advocacy resources that could assist pensioners living alone or in assisted living facilities. It was acknowledged that while the Board's authority is limited, future problems may arise if pensioners are unable to manage their affairs, which could result in additional responsibilities for the Board.

The discussion concluded with recognition that this issue reflects broader societal challenges with an aging population, and members expressed interest in researching potential service options to support affected individuals.

Adjournment

Mayor Richardson adjourned the meeting at 8:29 a.m.

APPROVED: ATTEST:

_____ _____

Mayor Theresa Richardson, Chair Jennifer Rogers, Police Pension Board Secretary

DATE APPROVED:

DATE PUBLISHED:

CITY OF RICHLAND
POLICE PENSION FUND
2025 REVENUE AND EXPENSE

Police Pension

Year of 2025	January	February	March	April	May	June	July	Preliminary August	September	October	November	December	Year to Date	Budget	YTD%
Beginning Balance	$ 372,075.86	$ 372,113.32	$ 373,127.92	$ 372,687.97	$ 372,268.29	$ 372,209.06	$ 372,419.44	$ 371,902.07							
REVENUE															
Investment Interest	1,558.70	1,455.88	1,493.08	1,638.64	1,474.60	1,378.42	1,480.70	1,091.45					11,571.47	12,000.00	96.4%
Other Interest Earnings													-	-	0.0%
Medical Reimburse													-	-	0.0%
Net Change in Fair Market Value													-	-	0.0%
Contribution- General Fund	31,000.00	42,000.00	28,000.00	34,000.00	28,000.00	28,000.00	27,000.00	19,000.00					237,000.00	451,700.00	52.5%
TOTAL REVENUE:	32,558.70	43,455.88	29,493.08	35,638.64	29,474.60	29,378.42	28,480.70	20,091.45	-	-	-	-	248,571.47	463,700.00	53.6%
EXPENSE															
Medical Insurance - <65	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
Medical Insurance - >65	4,007.76	4,007.76	4,007.76	4,007.76	4,007.76	4,007.76	4,007.76	3,840.77					31,895.09	50,100.00	63.7%
Dental Insurance - Retired	698.64	698.64	698.64	698.64	698.64	698.64	698.64	669.53					5,560.01	8,700.00	63.9%
Dental Expense Pension	124.00	129.00	-	414.00	-	1,504.00	-	70.25					2,241.25	6,600.00	34.0%
Medical Expense Pension	10,628.41	21,057.75	8,254.00	14,501.97	8,787.65	7,116.69	7,932.87	360.20					78,639.54	160,000.00	49.1%
Medicare Premiums	4,716.00	4,201.70	4,626.20	4,564.40	4,564.40	4,564.40	4,564.40	4,379.40					36,180.90	58,400.00	62.0%
Retirement Allowance	12,346.43	12,346.43	12,346.43	11,276.55	11,276.55	11,276.55	10,697.84	10,529.05					92,095.83	155,000.00	59.4%
Widow's Benefits	-	-	-	-	-	-	-						-	19,500.00	0.0%
Supplies													-	100.00	0.0%
Postage							96.56	5.31					101.87	150.00	67.9%
Travel					198.83								198.83	2,400.00	8.3%
Training & Conference				595.00									595.00	1,500.00	39.7%
Other Expenses							1,000.00						1,000.00	1,250.00	80.0%
Total Expense	32,521.24	42,441.28	29,933.03	36,058.32	29,533.83	29,168.04	28,998.07	19,854.51	-	-	-	-	248,508.32	463,700.00	53.6%
Revenues Over (Under) Expense:	37.46	1,014.60	(439.95)	(419.68)	(59.23)	210.38	(517.37)	236.94	-	-	-	-	63.15	-	
Ending Balance	$ 372,113.32	$ 373,127.92	$ 372,687.97	$ 372,268.29	$ 372,209.06	$ 372,419.44	$ 371,902.07	$ 372,139.01	$ -	$ -	$ -	$ -	$ 63.15	$ -	
ENDING BALANCE CONSISTING OF:															
Cash	156,458.07	157,472.67	157,032.72	156,613.04	156,553.81	156,764.19	156,246.82	156,483.76							
Investments	325,402.26	325,402.26	325,402.26	325,402.26	325,402.26	325,402.26	325,402.26	325,402.26							
Gain(Loss) on Investments	(109,747.01)	(109,747.01)	(109,747.01)	(109,747.01)	(109,747.01)	(109,747.01)	(109,747.01)	(109,747.01)							
Net Current Assets & Liabilities	-	-	-	-	-	-	-	-							
Ending Fund Balance	$ 372,113.32	$ 373,127.92	$ 372,687.97	$ 372,268.29	$ 372,209.06	$ 372,419.44	$ 371,902.07	$ 372,139.01	$ -	$ -	$ -	$ -			
Minimum Balance	$ 371,426.00	$ 371,426.00	$ 371,426.00	$ 371,426.00	$ 371,426.00	$ 371,426.00	$ 371,426.00	$ 371,426.00	$ 371,426.00	$ 371,426.00	$ 371,426.00	$ 371,426.00			

Please note: Any months marked as "Preliminary" are in draft form and are not for decision-making purposes. Preliminary months are subject to change per the completion of the City's monthly and annual closing processes.

SEPTEMBER 2025 POLICE PENSION BOARD CLAIM LOG

				MEDICARE	MEDICAL/RX/ADULT CARE	PHYSICAL EXAMS	DENTAL		VISION (non-medical)				HEARING AID	MASSAGE	ACUPUNCTURE	DEATH BENEFIT	TRAVEL/ TUITION	OPERATING EXP	GRAND TOTAL
P NO.	DATE OF SERVICE	CLAIMANT	SERVICE RENDERED	BOARD PAYMENT	BOARD PAYMENT	$400 YR MAX: BOARD PAYMENT	$4,000 YR MAX DENTAL: BOARD PAYMENT	$1,500 MAX BRIDGES/ DENTURES:- Every 5 Years BOARD PAYMENT	$150 YR MAX FRAMES: BOARD PAYMENT	$200 YR MAX CONTACTS: BOARD PAYMENT	LENS: BOARD PAYMENT	ONE EYE EXAM PER YEAR: BOARD PAYMENT	$5,000 BENEFIT PER 36 MONTHS BOARD PAYMENT	$50 MAX PER MONTH: BOARD PAYMENT	12 Visit Yr Max ACUPUNCTURE	$1,000 ONE-TIME PAYMENT: BOARD PAYMENT	BOARD PAYMENT	$450 Budgeted Operating Expenses BOARD PAYMENT	GRAND TOTAL
P2	10/1/25	Reimburse	Medicare	$174.70															$174.70
P4	10/1/25	Reimburse	Medicare	$185.00															$185.00
P7	10/1/25	Reimburse	Medicare	$184.00															$184.00
P9	10/1/25	Reimburse	Medicare	$185.00															$185.00
P10	10/1/25	Reimburse	Medicare	$185.00															$185.00
P10	12/16/24	Reimburse	Medical		$13.78														$13.78
P10	8/13/25	Reimburse	RX		$5.50														$5.50
P10	8/13/25	Reimburse	RX		$127.45														$127.45
P10	8/29/25	Reimburse	RX		$28.47														$28.47
P10	8/29/25	Reimburse	RX		$160.95														$160.95
P11	10/1/25	Reimburse	Medicare	$185.00															$185.00
P12	10/1/25	Reimburse	Medicare	$185.00															$185.00
P12	2/14/25	Reimburse	Vision									$25.40							$25.40
P12	6/6/25	Reimburse	Dental				$57.00												$57.00
P14	10/1/25	Reimburse	Medicare	$174.70															$174.70
P14	04/01/2025-04/30/2025	Reimburse	Assisted Living Facility		$6,004.25														$6,004.25
P14	05/01/2025-05/31/2025	Reimburse	Assisted Living Facility		$6,138.00														$6,138.00
P14	06/01/2025-06/30/2025	Reimburse	Assisted Living Facility		$4,833.73														$4,833.73
P15	10/1/25	Reimburse	Medicare	$185.00															$185.00
P17	10/1/25	Reimburse	Medicare	$185.00															$185.00
P19	10/1/25	Reimburse	Medicare	$185.00															$185.00
P20	10/1/25	Reimburse	Medicare	$185.00															$185.00
P21	10/1/25	Reimburse	Medicare	$185.00															$185.00
P22	10/1/25	Reimburse	Medicare	$183.00															$183.00
P23	10/1/25	Reimburse	Medicare	$185.00															$185.00
P24	10/1/25	Reimburse	Medicare	$259.00															$259.00
P28	10/1/25	Reimburse	Medicare	$185.00															$185.00
P30	10/1/25	Reimburse	Medicare	$185.00															$185.00
P31	10/1/25	Reimburse	Medicare	$185.00															$185.00
P31	6/18/25	Payment	Dental				$803.00												$803.00
P31	7/10/25	Payment	Dental				$970.00												$970.00
P31	8/6/25	Payment	Dental				$396.00												$396.00
P32	10/1/25	Reimburse	Medicare	$185.00															$185.00
P34	10/1/25	Reimburse	Medicare	$259.00															$259.00
P35	10/1/25	Reimburse	Medicare	$185.00															$185.00
P36	10/1/25	Reimburse	Medicare	$185.00															$185.00
PSEC																			$0.00
PEXP																			$0.00
			GRAND TOTAL	**$4,379.40**	**$17,312.13**	**$0.00**	**$2,226.00**	**$0.00**	**$0.00**	**$0.00**	**$0.00**	**$25.40**	**$0.00**	**$0.00**	**$0.00**	**$0.00**	**$0.00**	**$0.00**	**$23,942.93**

Red indicates Out of Network

Exceeded benefits

The above-listed claims were approved by the LEOFF I Police Pension Board at its regular meeting held on September 16, 2025.

We, the LEOFF I Police Pension Board Chairperson and Board Secretary, each swear under the penalty of perjury under the laws of the State of Washington certify that the above-listed claims are a true and correct listing of claims approved by the LEOFF I Police Pension Board on the date identified above.

LEOFF I Police Pension Board Chair: _____ Date: September 16, 2025

Police Pension Board Secretary: _____ Date: September 16, 2025

POLICE PENSION BOARD
AGENDA ITEM COVERSHEET

Meeting Date: 9/16/2025 Agenda Category: Business Items

Subject
Pensioner Hearing Aid Reimbursement - $6,250

Department
Police Pension Board

Document Type
Police Pension Board Item

Recommended Motion
None.

Summary
A pensioner is seeking reimbursement of $6,250 for hearing aids. The individual initially obtained hearing aids through Amplifon, the City's contracted provider, but reported the devices did not meet his needs, despite multiple adjustment appointments. As a result, the pensioner returned to his previous provider and purchased alternative hearing aids that were more effective. While the City's current Cigna benefits allow for a maximum $5,000 benefit every 36 months for hearing aids, the pensioner is requesting that the Board approve reimbursement of $6,250 for the devices purchased outisde of Amplifon, in addition to the costs already incurred through the City's contracted provider.

Attachments
1. Hearing Aid Reimbursement Request Correspondence

CITY OF RICHLAND
POLICE PENSION CLAIM FORM

RECEIVED
AUG 28 2025
RICHLAND CITY CLERK

Payable To: [redacted]

Pensioner Nam [redacted]

Address: [redacted] **City, State, Zip:** [redacted]

Home Phone: **Cell Phone:** [redacted]

Email: [redacted]

To keep the City's records current, please circle any information that needs updating

PENSIONER MUST COMPLETE THIS SECTION AND ATTACH SUPPORTING DOCUMENTS

DATE OF SERVICE	TYPE OF SERVICE Medical / Dental / Vision RX / Medicare Payment	DESCRIPTION OF SERVICE	AMOUNT REQUESTED FOR BOARD APPROVAL
8/12/25	Miracle Ear Hearing Aids	SEE Purchase Agreement Attached	6,250 -

SUBMIT CLAIMS FOR PAYMENT VIA:

Hand Delivery: Police Pension at Richland City Hall, 625 Swift Blvd. Richland, WA 99352

Mail: Police Pension Board Secretary, 625 Swift Blvd. MS-05, Richland, WA 99352

Fax: 509-942-7390

By signing this form, I declare that I have read and understand the following statements, and I have attached the required documentation.

I have attached copies of the healthcare provider's itemized billing statement; Explanation of Benefits (EOB) statements from Medicare / Cigna / other insurance; receipts; prescription information; other supporting documentation.

I understand that I am responsible for submitting claims in a timely manner before charges become delinquent. This claim contains no late charges, interest or missed appointment charges.

Claims must be submitted within six (6) months from date of service to be valid.

The services are in accordance with RCW 41.26.150.

SIGNATURE: [redacted] **DATE:** 8/25/25

FOR INTERNAL USE ONLY

Vendor Number:	Account Code:

Revised 11/2021

December 12th, 2025

Police Pension
~~Retirement~~ Board
City of Richland
Jennifer Rogers
jrogers@ci.richland.wa.us
FAX 509942-7379

Police Pension

I am requesting a complaint be passed on to the ~~Retirement~~ Board regarding a painful journey in acquiring hearing aids that meet minimal standards.

First of all, I had a 10 year run on a single pair of hearing aids from Miracle Ear. Just to be clear, I/we purchased only one pair in 10 years, even though policy allowed new purchases along the way. After 10 years, I was denied the use of Miracle ear services, due to a policy that required testing by an examiner meeting credential requirements. The accumulative hearing testing history was all consistent, with yearly tests at Miracle Ear and your required certified tech. I felt directed to use the Amplifon/My Hearing Center/Signia brand hearing aids.

Over several months, the hearing aids were sub standard and failed to meet my needs, even minimally. My Hearing Center attempted to reduce severe static and a total failure of the product. After five attempts to have the hearing aids adjusted, My Hearing Center declined to serve me further, without a $1,200 service contract.

I am estimating the adjustments to the hearing aids reduced their ability to help me with hearing 50%. I was able to hear at the same level or not hear at the same level, with or without the hearing aids. I had the hearing aids tested by a competitor and they are "dummied down" to a point where I am not benefiting from their service.

These policies forced me to pay out of pocket, a sum of $6,250 to return to the product that worked for 10 years. The research regarding the health of the brain supports my decision to help myself. Your policies place me at risk of long term injury. I am requesting the ~~Retirement~~ Board consider my complaint and look at individuals in the future.
PENSION

I am requesting an answer from the Board after reviewing my complaint.

Respectfully Submitted,

[redacted]

August 28th, 2025

City of Richland
Police Pension Board
FAX 509 942-7379

After careful consideration, in addition to the complaint you will receive regarding My Hearing Centers/Amplifon/Signia Brand Hearing aids, I am now requesting your review and consideration for an exemption for payment towards the $6,250 that I was forced to pay out of pocket on August 12th, 2025. I am requesting an exception based upon the following:

1. I had Miracle Ear for a period of 10 years, with no additional claims to the Retirement Board for the entire period. The Miracle Ear hearing aids worked for me the entire time.
2. I was denied a new purchase with Miracle Ear, due to the Miracle Ear hearing examiner not meeting Board required certification, I felt forced to acquire the Amplifon/Signia brand, which was covered entirely by Signa.
3. The product worked poorly, far from minimal standards. I returned to My Hearing Center on January 10th, 15th, 23rd, as well as Feb 3rd and 10th. On February 16th, I was treated for long term COVID, bronchitis, pneumonia, and COPD. It was finally determined that I had suffered a "Lung Injury" of unknown origin. When I recovered, I returned to My Hearing Center on 5-5-2025, which was the 6th time they tried to adjust the hearing aids to meet even sub-minimal standards. They could not provide me with a reasonable product. They informed me that I had to pay $1,200 for continued service and that should have happened on the second courtesy visit for service.
4. I then received a loaner pair of hearing aids from Miracle Ear and they worked perfectly, far better than the 10 year pair I owned previously. I purchased the product for cash on 8-12.
5. The Miracle Ear product is able to compensate for an inner ear injury and surgery that occurred in the year 2000.

I am requesting CIGNA and the Police Pension Board review my claim for an exception.

Respectfully Submitted

[redacted]

[redacted]

[redacted]

Purchase Agreement

08/12/2025
TRACKING #:
INVOICE #: 258
Customer ID #: [redacted]

QTY	ITEM	UNIT PRICE	AMOUNT
1	Left Hearing Aid MIRACLE-EAR SPARK(TM) MEMINI E 4 5P R-R SB BTE RITC Digital (New) Mfr Warranty Expires: 08/11/2028 CPT code: V5257	5,000.00	5,000.00
1	Right Hearing Aid MIRACLE-EAR SPARK(TM) MEMINI E 4 5P R-R SB BTE RITC Digital (New) Mfr Warranty Expires: 08/11/2028 Discount: $3,750.00 (Consultant Discount) CPT code: V5257	5,000.00	1,250.00
1	Accessory: LI RIC CHARGER Discount: $500.00 (Consultant Discount) CPT code: V5267	500.00	0.00
1	Accessory: TV STREAMER Discount: $330.00 (Consultant Discount) CPT code: V5267	330.00	0.00
	Check 08/12/2025 REF 3132		-6,250.00

INVOICE TOTAL	$6,250.00
SALES TAX	$0.00
GRAND TOTAL	**$6,250.00**
TOTAL INSURANCE PAYMENTS	$0.00
TOTAL WRITE-OFFS	$0.00
TOTAL CUSTOMER PAYMENTS	$6,250.00
AMOUNT DUE FROM CUSTOMER	**$0.00**