



CITY OF
Vancouver
WASHINGTON

**Fire
Pension Board
Special Meeting Schedule
July 24, 2024**

**Fire Pension Board
4:15pm
Aspen Conference Room, 1st Floor City Hall
Call In: 1 347-941-5324
Phone Conference ID: 214 571 195#
Teams Meeting ID: 251 675 865 872
Passcode: jDFVpf**

Please contact Caylee Trant at (360) 487-8403 or
Caylee.Trant@cityofvancouver.us
if you are unable to attend.
Thank you!



Fire Pension Board

Wednesday, Jul. 24, 2024
4:15p.m.
Vancouver City Hall
Aspen Conference Room, 1st Floor

MEETING ACCESS INFORMATION:

[Join the meeting now](#)

Call In: 1-347-941-5324

Phone Conference Number: 214 571 195#

AGENDA

1. Call to Order and Roll Call – McEnerny-Ogle
2. New Business – Trant
 - a. Request for Hearing Aids – Claimant A

Members

Anne McEnerny-Ogle
Chair

Anthony Glenn, City Treasurer
Natasha Ramras, CFO/Board
Secretary
Patrick Kelly, Fire Retiree
Michael Lyons, Fire Retiree

Human Resources Department

P.O. Box 1995
Vancouver, WA 98668
360-487-8403
TTY: 711
cityofvancouver.us

To request accommodation or other formats, please contact:
Caylee Trant | 360-487-8403 | TTY: 711 | Caylee.Trant@cityofvancouver.us



MEMORANDUM

DATE: July 24, 2024
TO: Fire Pension Board
FROM: Caylee Trant, Pension Board Coordinator
RE: **Request for Hearing Aids – Claimant A**

Attached for Board review is a request for hearing aid reimbursement for Claimant A and Section III.5 of the Board’s Rules and Regulations requires:

“If a member chooses not to use their Medical Insurance benefits, Board preapproval is required.”

Claimant A is seeking preapproval to use an out-of-network provider for Hearing Aids. Claimant A’s current hearing aid is falling apart and are outside of the three-year warranty which expired on December 02, 2023. Claimant A returned his current hearing aids to Advanced Hearing Aids for an evaluation.

Section III.5 of the Board’s Rules and Regulations states:

“City of Vancouver requires a “Hearing Aid Application Request Form” to be completed in full by the member and provider. Members must submit the following required documents needed for Board review:

- a) Documentation:
 - i. Denial of hearing aid coverage from insurance provider or
 - ii. Explanation of Benefits (EOB) and/or
 - iii. Letter from Physician, Audiologist, licensed Hearing Aid Examiner or Hearing Instrument Specialist providing reason for use of an out-of-network provider, and
- b) Quotes from at least two providers, and
- c) Current hearing aid test and hearing aid recommendation from a physician, Audiologists, licensed Hearing Aid Examiner or Hearing Instrument Specialist, and
- d) Hearing aids must have a three-year warranty.”

Claimant A has provided two hearing tests, two Hearing Instrument Specialist evaluations, and two quotes for hearing aids that are adequate for his hearing loss. All hearing aids have a three-year warranty. Claimant A would like to choose Advanced Hearing Aids recommendation due to his hearing requirements and the relationship he has built with them over the years.

“The Board will only pay up to the out-of-network limits set forth below based on the specific type of hearing loss.

Out-of-network Hearing Aid Limits for 3-year period:

Slight to Mild Hearing Loss (16-40dB): \$1800/ear

Moderate – Moderately Severe Hearing Loss (41-70dB): \$2500/ear

Severe - Profound Hearing Loss (71-90dB): \$3500/ear”

Claimant A’s severity of hearing loss for both ears are in the Severe to Profound range.

Advanced Hearing Aids:

- Oticon Real 1: \$7,000

Miracle Ear Hearing Aids:

- ME Level 5: \$11,790

Action Requested

Consider the request from Claimant A for hearing aids.



City of Vancouver Human Resources

415 W 6th St – 3rd Floor/P.O. Box 1995

Vancouver, WA 98668-1995

P: 360.487.8403 F: 360.487.8418

Email: Caylee.Trant@cityofvancouver.us

Physician's Statement

LEOFF I Member Name:

Claimant A

SSN:

Birth Date:

The LEOFF I member, as listed above, has applied to the City of Vancouver Pension Board for approval of medical services. Please complete and sign the **PHYSICIAN** section of the form as listed below.

Hearing Test Conducted (please check all that apply):

Pure-tone Bone conduction Speech Auditory brainstem response (ABR)

Otoacoustic emissions test (OAE) Impedance testing (tympanometry and acoustic reflexes)

Severity of Hearing Loss:	Left	Right
Slight Hearing Loss (16 - 25db)	<input type="checkbox"/>	<input type="checkbox"/>
Mild Hearing Loss (26 - 40db)	<input type="checkbox"/>	<input type="checkbox"/>
Moderate Hearing Loss (41 - 55db)	<input type="checkbox"/>	<input type="checkbox"/>
Moderately Severe Hearing Loss (56 - 70db)	<input type="checkbox"/>	<input type="checkbox"/>
Severe Hearing Loss (71 - 90db)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Profound Hearing Loss (91+db)	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Type of Hearing Loss (please check one):

Sensorineural Conductive Mixed Other: _____

Additional Information (please circle all that apply):

<input checked="" type="checkbox"/> Bilateral	<input type="checkbox"/> Unilateral
<input type="checkbox"/> Symmetrical	<input checked="" type="checkbox"/> Asymmetrical
<input checked="" type="checkbox"/> Progressive	<input type="checkbox"/> Sudden Onset
<input type="checkbox"/> Fluctuating	<input type="checkbox"/> Stable

Diagnosis:

Right Side: Mild-to-severe progressively sloping high frequency sensorineural hearing loss.

Left Side: Mild-to-profound progressively sloping high frequency sensorineural hearing loss.

(Please see attached audiogram for reference)

Prognosis:

People with noise-induced severe-to-profound high frequency SNHL like ██████████ struggle to hear speech clearly, especially in the presence of competing background noise. The severity of their hearing impairment increases w/ age, and it becomes more difficult to separate noise from the speech the individual wants to hear. Modern hearing instrument technology helps support the individual's brain and clean up the intended speech signal through DSNP (Digital Signal Noise Processing), allowing the hearing instrument to accurately pinpoint not only where sounds are coming from in relationship to the wearer, but also classify what the sounds are thanks to the processing chip being trained with over 12 million real world sounds. Due to the severe-to-profound high frequency nature of his loss, I believe premium level technology will provide him the greatest benefit and audibility.

Based on the needs of the patient, I would recommend the following (please be specific):

I propose to fit ██████████ with bilateral (2) new Oticon Real 1 miniRITE-T (Receiver-in-the-Ear) digital BTE (Behind-the-Ear) hearing instruments. They would be silver in color with #3, 85 gain receivers for both left and right sides coupled with bilateral (2) Custom Canal Lock RIC earmolds. These hearing instruments would come with a 3 Year Manufacturers Warranty for Repair & Service along with 3-Year Loss & Damage Coverage including a one-time replacement per device. Pursuant to the updated City of Vancouver Pension Board Hearing Aid Guidelines and the severe-to-profound nature of ██████████ hearing loss, the total cost for these hearing instruments would be \$3,500.00 per ear (\$7,000.00 total) and would include the hearing instruments, custom earmolds, batteries, cleaning supplies, the initial hearing instrument fitting, and all continued follow-up care for the life of the hearing instruments.

PROVIDER INFORMATION

Type of Provider (please check one):

Audiologist Hearing Instrument Specialist Other: _____

Physician's Signature: Kyle R. Koch Date: 06/25/2024

Typed or Printed Name Kyle R. Koch, BC-HIS Phone: (360) 695-8742

Physical Address, including zip code:
6612 E. Mill Plain Blvd. Vancouver, WA 98661

Mailing Address, including zip code:
6612 E. Mill Plain Blvd. Vancouver, WA 98661

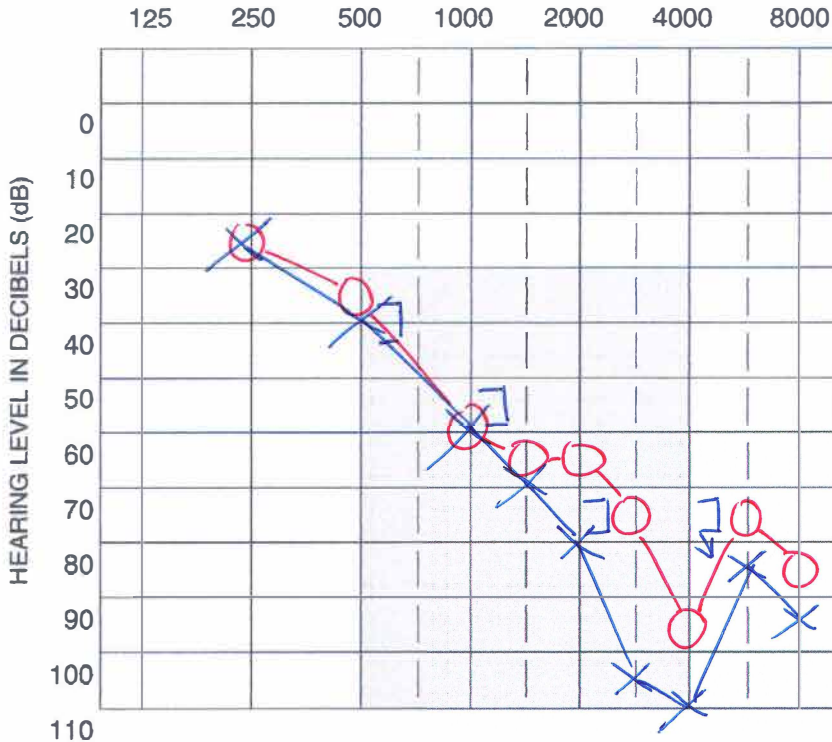
ADVANCED HEARING AIDS, INC.

6612 E. MILL PLAIN BLVD. VANCOUVER, WA 98661 Ph. (360) 695-8742

www.advancedhearinc.com

NAME [REDACTED] AGE [REDACTED] DATE 3/15/24
 ADDRESS [REDACTED] PHONE [REDACTED]
 CITY, STATE & ZIP [REDACTED]
 EXAMINER Kyle R. Koch, A.A., BC-HIS AUD. SERIAL NO. 00161
 COMMENTS DOB: [REDACTED]

AUDIOGRAM



AUDIOGRAM KEY

		RIGHT	LEFT
AIR	UNMASKED	○	×
	MASKED	△	□
BONE MASTOID	UNMASKED	<	>
	MASKED	[]
EXAMPLES OF NO RESPONSE SYMBOLS			

	SRT	Speech Discrimination	MCL	UCL
R	DNT	76% @ 85dB	85/12	110/120
L	DNT	64% @ 90dB	90/12	110/120

HEARING AID SIMULATOR RESULTS

	dB/Octv.	MCL/GAIN	UCL/SPL (MPO)
R		dB	dB
L		dB	dB

PTA (dB HL)

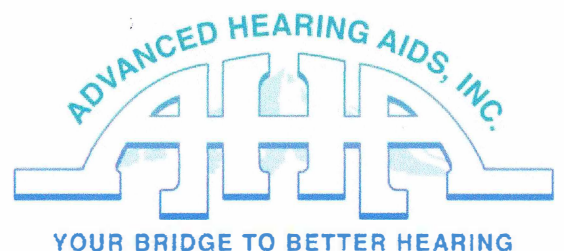
	500 Hz	1000 Hz	2000 Hz
R	dB	dB	dB
L	dB	dB	dB

TARGET 2cc - FOG

Printout(s) Enclosed Yes No

	250	500	1K	2K	3K	4K
R						
L						

COMMENTS Test Reliability: Good. Otoscopic examination: Pinnae and EACs clear, both TMs visible and pearly in appearance. Pure tone audiometric evaluation results:
 (R) Mild to severe high frequency SNHL.
 (L) Mild to severely profound high frequency SNHL.





Health Services LLC / 1716 G Street , Lewiston, ID. 83714 / 208-746-8567

To Whom is May Concern,

Claimant A has a severe hearing loss. In my recommendation PT needs an ME level 5. This hearing aid is the best option for his hearing loss. The hearing aid has a three year warranty. The price for this model is \$11,790. I would also recommend a TV streamer. The cost is \$299.

Thank you,

Logan Tolbert
H.I.S.
HAS-T-10239011

A Franchisee Owned and Operated Business

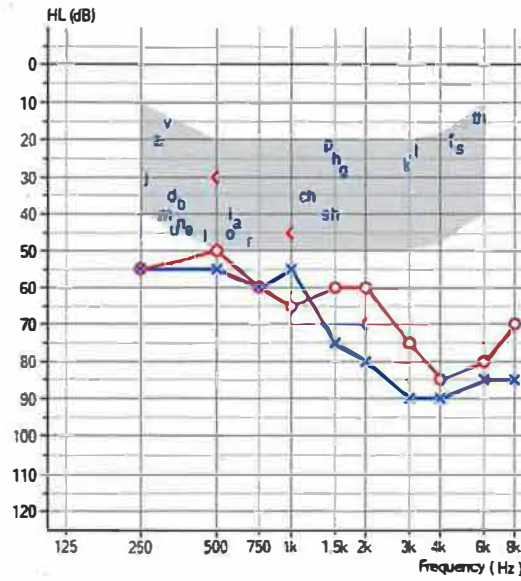
MedRx

7/16/2024 9:18:19 AM

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Claimant A

Audiometry



Right	125	250	500	750	1k	1.5k	2k	3k	4k	6k	8k	Left	125	250	500	750	1k	1.5k	2k	3k	4k	6k	8k
AC		55	50	60	85	80	60	75	85	80	70	AC		55	55	80	55	75	80	90	90	85	85
BC			30		45		70					BC											

1 ○ Air Conduction, AI=3%, PTA=58, HFA=70
 2 ○ Bone Conduction, PTA=48, HFA=82
 3 × Air Conduction, AI=0%, PTA=63, HFA=76

AC	SRT	WR	WR, Aided	MCL	UCL
Left		30% at 85dB			
Right		45% at 75dB			
Both		60% at 85/75dB			

Audiometry Legend	Right	Left
Air Conduction	○	×
Air Conduction, Masked	△	□
Bone Conduction	<	>
Bone Conduction, Masked	◀	▶
Sound Field	S	S
Sound Field, Aided	A	A
Comfortable Level	H	H
Uncomfortable Level	U	U