



**LEOFF Disability Board Meeting Agenda
Wednesday, November 04, 2026, 9:30 AM
Council Chambers, 616 NE 4th AVE**

NOTE: The City welcomes public meeting citizen participation. TTY Relay Service: 711. In compliance with the ADA, if you need special assistance to participate in a meeting, contact the City Clerk's office at (360) 834-6864, 72 hours prior to the meeting so reasonable accommodations can be made (28 CFR 35.102-35.104 ADA Title 1)

To Participate Remotely:

OPTION 1 -

1. Go to www.zoom.us and download the app or click "Join A Meeting" and use Meeting ID – 863 5504 0200
2. Or, from any device click <https://cityofcamas-us.zoom.us/j/85195573239>

OPTION 2 - Join by phone (audio only):

Dial 877-853-5257 and enter meeting ID# 851 9557 3239

SPECIAL MEETING

CALL TO ORDER

PUBLIC COMMENTS

This is the public's opportunity to comment about any item on the agenda, including items up for final action.

APPROVAL OF THE MINUTES

1. [July 29, 2026 LEOFF Board Meeting Minutes](#)

CLAIMS SUMMARY REPORT

2. [July 1, 2026 - September 30, 2026 Claims Summary Report](#)

OTHER BUSINESS

3. Board Member Comments

CLOSE OF MEETING



Staff Report

SUMMARY:

Minutes should be reviewed and approved as-is or with necessary changes/edits.

ACTION REQUESTED:

Motion to approve the minutes from the July 29, 2026, meeting.

IF CHANGES REQUESTED:

Motion to approve the minutes from the July 29, 2026, meeting with the discussed changes.



LEOFF Disability Board Meeting Minutes - draft
Wednesday, July 29, 2026, 10:30 AM
Council Chambers, 616 NE 4th AVE

NOTE: Please see the published agenda packet for item attachments.

SPECIAL MEETING

Present: Don Chaney, John Nohr, Bob Rhode

Absent: Adam Stadtlander, Marilyn Boerke

Staff: Jennifer Gorsuch, Heidi Steffensen, Shawn MacPherson and Sophie Webster

CALL TO ORDER

Chair Nohr called the meeting to order at 10:35 a.m.

PUBLIC COMMENTS

No one from the public wished to speak.

APPROVAL OF THE MINUTES

It was moved by Board Member Chaney, and seconded, to approve the meeting minutes of April 17, 2026. The motion carried unanimously.

CLAIMS SUMMARY REPORT

Administrative Services Director Gorsuch reviewed the reimbursement claims that were submitted and processed from April 1, 2026, through June 30, 2026, in the amount of \$38,906.78, with the Board. These claims were approved by the Administrative Services Director per the authority delegated by the Board and reimbursement claims that were previously approved by the Board.

Gorsuch responded to questions from the Board.

It was moved by Board Member Chaney, and seconded, to approve the City of Camas LEOFF Disability Board reimbursements. The motion carried unanimously.

OTHER BUSINESS

A. Discussion and Decision Related to Retiree Request

It was moved by Board Member Chaney, and seconded, to approve the request for continuation of home health care services up to the maximum allowable amount as outlined in the LEOFF Board Rules, subject to bi-annual review.

B. Board member comments

Board member Chaney asked for information on what the City pays from the budget for LEOFF1 retirees. Director Gorsuch responded.

Director Gorsuch also answered a question from the Board regarding total expenses for LEOFF1 retirees.

CLOSE OF MEETING

The meeting closed at 10:47 a.m.



Staff Report

SUMMARY:

A summary of all reimbursement requests processed from July 1, 2026 – September 30, 2026, are included for review in the attached spreadsheet. The total amount of reimbursements is \$50,919.30.

These reimbursement requests were authorized by the Administrative Services Director, as outlined in the delegation of authority given by the Board.

The documentation submitted will be available at this meeting for review or in the event of questions from the Board.

ACTION REQUESTED:

Motion to approve the City of Camas LEOFF Disability Board reimbursements as presented.

2026													
Expense Type	Jan-26	Feb-26	Mar-26	Apr-26	May-26	Jun-26	Jul-26	Aug-26	Sep-26	Oct-26	Nov-26	12/1/2026	YTD Total
Medicare Premiums			\$ 8,206.50			\$ 8,206.50			\$ 8,206.50				\$ 24,619.50
Rx/Office Visits/Co-pays	\$ 342.11	\$ 129.34	\$ 873.55	\$ 582.08		\$ 53.35	\$ 558.02	\$ 3,136.53	\$ 141.00				\$ 5,815.98
Dental Care (Verde)		\$ 902.00	\$ 193.00	\$ 1,874.00	\$ 997.00	\$ 1,500.00	\$ 627.00	\$ 728.00	\$ 272.00				\$ 7,093.00
Eye Care													\$ -
Hearing Aids													\$ -
Medical Equipment													\$ -
Assisted Living (pre-approved)													\$ -
Home Health Services (pre-approved)		\$ 4,875.00	\$ 4,602.00	\$ 13,750.10	\$ 8,706.75	\$ 3,237.00	\$ 17,745.00	\$ 8,312.25	\$ 11,193.00				\$ 72,421.10
Miscellaneous													\$ -
Total	\$ 342.11	\$ 5,906.34	\$ 13,875.05	\$ 16,206.18	\$ 9,703.75	\$ 12,996.85	\$ 18,930.02	\$ 12,176.78	\$ 19,812.50	\$ -	\$ -	\$ -	\$ 109,949.58
			\$ 20,123.50			\$ 38,906.78			\$ 50,919.30	\$ -			

- Descriptions**
- Medicare Part B
 - Rx/Office Visits/Co-pays
 - Dental (Fl. Last name)
 - Eye Care
 - Hearing Aid
 - Med. Equip.
 - Assisted Living (Fl. Last name, Month Year)
 - Home Health Services (Fl. Last name)
 - Misc. Medical Expenses

Police 6030.00.0000.000.5212000.51000 (7 participants)

Fire 6030.00.0000.000.5221000.521000 (2 participants)

1st Quarter = 03/16/2026
2nd Quarter = 06/15/2026
3rd Quarter = 09/21/2026
4th Quarter = 12/21/2026