

MINUTES

METROPOLITAN EMPLOYEE BENEFIT BOARD

MEDICAL & LIFE COMMITTEE

August 26, 2025

The Metropolitan Employee Benefit Board's Medical & Life Committee met on Tuesday, August 26, 2025, in the Sonny West Conference Room, Howard Office Building, 700 President Ronald Reagan Way, Nashville, TN at approximately 9:38 a.m.

Committee Members present: Chair Harold W. Finch, II; Vice-Chair: *Christy Pruitt-Haynes; Members: B.R. Hall, Sr., Shannon Hall and Robert Weaver. Alternate(s): Edna J. Jones.

Member G. Thomas Curtis was unable to be present.

Others present: Christina Hickey, Metro Human Resources and Hannah Zeitlin, Metro Legal Department.

Board Member **Jonathan Puckett was present.

The Human Resources staff submitted the following for the Committee's consideration and appropriate action:

1. Public Comment Period

A maximum of five (5) persons who write their names on the sign-up sheet provided at the meeting will be allowed to comment on matters that are germane to items on the Agenda. Comments are limited to a maximum of two (2) minutes per person. To provide comment, you must sign up prior to the beginning of the meeting.

There were no public comments.

2. Self-insured Cigna HRA plan appeal – Dependent of employee from District Attorney's Office.

Christina Hickey reported to the Committee that a dependent of an employee from the District Attorney's Office, participating in the self-insured Cigna HRA plan was denied coverage of Sucraid 8500 unit/ml solution due to medical necessity. She stated that previously, this request and grievance for this coverage were denied and the employee and their dependent are appealing the Cigna HRA plan denial and have supplied documentation on their appeal. Cigna has also supplied documentation on the denial. She also noted this appeal was heard in February 2025 and deferred pending additional information supplied by the member.

The employee and dependent were present.

Paul Huffman, Cigna, was also present.

Paul Huffman reviewed the coverage policy for the medication and stated that it was denied as the request does not meet the criteria for the medication. He noted that the information submitted by the provider did not meet the criteria and the additional information provided did not change the decision.

*Denotes the arrival of Christy Pruitt-Haynes.

The dependent and employee addressed the Committee regarding her condition, testing and the request for the medication.

There was some discussion of the tests she has already had, policy updates, the tests that are accepted by Cigna and there being no diagnosis in the medical record to support the request for the medication.

There was some discussion of the impacts of the deficiency and need for the medication.

2. Self-insured Cigna HRA plan appeal – Dependent of employee from District Attorney's Office. (continued)

B.R. Hall moved for approval of the medication based on the circumstances of this particular case. Shannon Hall seconded, and the Committee approved without objection.

3. Self-insured Blue Cross Blue Shield PPO plan appeal – Employee from General Sessions Court.

Christina Hickey reported to the Committee that an employee from the General Session Court, who was participating in the self-insured BCBS PPO plan at the time, was denied coverage of out of network services. Additionally travel, meals, and lodging were denied per coverage policy unless approved for organ transplant related services. She stated previously, this request and grievance for this coverage was denied and the employee is appealing the BCBS PPO plan denial and has supplied documentation on their appeal. She stated BCBS has also supplied documentation on the denial. Ms. Hickey also noted this appeal was heard in February 2025 and deferred in May for additional information from BCBS.

The employee was present.

Paula Smith, BCBS, was also present.

The employee addressed the Committee regarding his condition, treatments, past procedures and the most recent procedure related to this claim.

Paula Smith stated this was a claim with an out of network provider and was paid correctly based on out of network benefits consistent with the plan design. She stated it also included a request for travel related expenses, which is not covered unless it is related to organ transplant.

After some discussion of local in network providers, Shannon Hall moved to uphold the denial of the claim. Robert Weaver seconded, and the Committee approved without objection.

4. Self-insured Cigna HRA plan appeal - Dependent of employee from the Fire Department.

Christina Hickey reported to the Committee that a dependent of an employee from the Fire Department, participating in the self-insured Cigna HRA plan was denied coverage of CPT 64555, 2 units, percutaneous implantation of neurostimulator electrode array; peripheral nerve (excludes sacral nerve). She stated this was denied as the Cigna Medical Policy states that this procedure is considered experimental, investigational, and not medically necessary. She stated previously, this request and grievance for this coverage were denied and the dependent is appealing the Cigna HRA plan denial. She stated Cigna has also supplied documentation on the denial and this appeal was deferred as the appellant was unavailable at the last meeting.

The employee was present.

Paul Huffman, Cigna, was also present.

The employee discussed the dependents' journey with different conditions that led to this request.

Paul Huffman reviewed the Cigna medical policy that states this procedure is considered experimental, investigational and not medically necessary.

**Denotes the arrival of Jonathan Puckett.

After some discussion of the medical record, B.R. Hall moved for approval of this coverage based on the circumstances of this particular case.

With nothing further presented, the meeting adjourned at 10:22 a.m.

ATTEST:

APPROVED:

Shannon B. Hall, Director
Human Resources

Harold W. Finch, II, Chair
Medical & Life Committee