## S. 60 Payment of sexual assault exams Testimony by Judy Rex, Executive Director 2.27.15

The purpose of S. 60 is to implement some cost-saving measures for the Victim Compensation Program and the Sexual Assault Program due to declining revenues to the Center's special funds.

The Victim Compensation Program requires the victim to report to law enforcement in order to be eligible for the program and then their health insurance must be billed for any medical and/or counseling expenses incurred as a direct result of a crime. What insurance doesn't cover, the Compensation Program will cover up to a \$10,000 cap. For uninsured victims, the program has been reimbursing health care providers and facilities at 70% of billed charges. S. 60 would reduce the reimbursement rate to 60%.

Vermont statute allows a rape victim to obtain a rape exam without reporting to law enforcement and requires the state to pay for that exam. Several years ago, the Sexual Assault Program developed a billing exception form that the hospitals now use giving the victim the choice to have their insurance billed or let the state pay for the exam. Most victims opt for the state to pay because they don't want a family member finding out he or she was raped. For example, many college students are covered by their parent's health insurance and they are fearful of their parent finding out through the EOB or because there is a deductible.

S. 60 changes the statute to require the victim's insurance to be billed for rape exams. The state will only pay when the victim does not have health coverage or if their insurance does not cover the entire cost of the exam. For uninsured victims, the program would reimburse at the 60% rate.

To address the privacy concerns of rape victims, the bill does two things. First, for those plans governed by VT law, a health insurer cannot impose a co-pay or deductible so the cost of the exam would be covered. Since this would not apply to high deductible plans regulated by the federal government, the bill allows for the Center and insurers to develop a MOU to address how to handle the high deductible plans. The second concern of the EOB from the rape exam will also be addressed in the MOU by allowing a victim of sexual assault to do a change of address at the time of the exam and can redirect the EOB to another address or have it sent to the Center to protect their privacy.

The Center, the VT Network Against Domestic and Sexual Violence who administers the SANE program, the VT Hospital Association, BC/BS, MVP and Medicaid have been meeting to discuss these issues and have a number of changes we would like to propose to the bill as introduced.

## S. 60 – Proposed Changes

Section 1

(a)(1) Remove the language on page 2, line 6: "including the initial examination and any related care and services"

Explanation: This language is covered in the definition of "sexual assault exam".

(2) Remove this subsection (p.2, line 7-10)

Explanation: Health insurers would not bill the state - the hospitals would do so. This issue will be addressed in the MOU, and we believe it is covered in (2) of Section 4.

<u>Section 4 - MOU – page 5</u> Line 2 - add Access after Health – Department of Vermont Health Access Explanation: typo

Line 4 – remove "each hospital licensed in this state"

Explanation: The Center and insurers would come up with a plan to ensure that the change of address and proper billing can happen and then instruct the hospitals as to the process for getting reimbursed. The Hospital Association would still help with the MOU process and help us determine which billing codes will be used, but they do not need to be included in the statute.

## <u>Section 5 – Effective Date - page 5, line 16</u>

Sections 1 and 3 should take effect on 10/1/15

Explanation: We will need some planning time before these sections can go into effect

 Question – Can we split subdivision (c) in Section 3 (page 4, line 11) into 2 separate subdivisions, so that the portion that 60% billed charges from the hospital can go into effect upon passage?

Sections 2 and 4 should remain effective upon passage.