



Andy Beshear
GOVERNOR

Jacqueline Coleman
LIEUTENANT GOVERNOR

PUBLIC PROTECTION CABINET
Kentucky Office of Claims and Appeals

Crime Victims Compensation Board
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Ray A. Perry
SECRETARY

DJ Wasson
DEPUTY SECRETARY

John Hardesty
EXECUTIVE DIRECTOR

NOTICE OF RESCHEDULED MEETING

Date: February 18, 2025

Time: 10:00 AM Eastern Standard Time (EST)

Location: 500 Mero St., Frankfort KY in Conference Room 259SW with a Microsoft Teams option

- Call to order and roll call
- Approval of January 2025 minutes
- Executive Director's Report
- Discussion and approval of grievance and nondiscrimination policy
- For Instructions from the Board
- Recommended Orders-Awards
- Recommended Orders-Denials
- Sexual Assault Examination-Awards
- Sexual Assault Examination-Denials
- Review of calendar and next meeting
- Adjournment

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Office Of Claims And Appeals

Crime Victims Compensation Board

Agenda

[REDACTED]
February 18, 2025

Total
Claims: **84**

Executive Director Hardesty reported to the Board that for January 2025:

Crime Victims Compensation:

- 55 claims were received
- 55 claims were set up
- 6 full investigations were completed
- 9 emergency investigations were completed
- 54 claims were assigned/reassigned to investigators
- 6 claims were awarded
 - Total Awarded: \$60,412.75 (includes additional and emergency awards)
- 1 additional award was rendered
- 6 claims were denied
- 3 debt appeals were denied

Restitution and Collections:

- \$17,255.29 received in restitution
- \$1,423.81 received in donations
- \$0.00 received in subrogation
- \$1,393.55 received from the PIECP program
- \$20,072.65 total received

The Sexual Assault Examination Program:

- 76 claims were received
- 76 claims were set up
- 34 claims were awarded
 - Total Awarded: \$12,297.03
- 16 claims were denied

65 total claims were decided by the Board for January 2025.

For Instructions From the Board

CV-2022-00052/[REDACTED] on behalf of [REDACTED]	(Bissell Roberts)
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Grant Award - \$0.00 (Medical/Dental)	Paid -
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Notes: Exceptions filed by Inmate Anderson, #321855

Grant Award - \$0.00 (Medical/Dental)	Paid -
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Notes: Exceptions were filed by Inmate Anderson, #321855

CV-2024-00376/[REDACTED]	()
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Grant Award - \$0.00 (Claim Withdrawn)	Paid -
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Notes: Claimant has requested to withdraw claim

CV-2024-00451/ [REDACTED] ()
[REDACTED]
Grant Award - \$0.00 (Claim Withdrawn) Paid -
Notes: Claimant has requested to withdraw claim

CV-2024-00519/ [REDACTED] ()
[REDACTED]
Grant Award - \$0.00 (Claim Withdrawn) Paid -
Notes: Claimant has requested to withdraw claim

CV-2024-00560/ [REDACTED] ()
[REDACTED]
Grant Award - \$0.00 (Claim Withdrawn) Paid -
Notes: Claimant has requested to withdraw claim

Recommended Orders - Awards

CV-2020-00186/ [REDACTED] (Amy Leenerts)
on behalf of [REDACTED]
Grant Award - \$219.00 (Medical/Dental) Paid -
Notes: Amended R/O Granting an Additional Award

CV-2024-00034/ [REDACTED] (Bissell Roberts)
[REDACTED]
Grant Award - \$938.60 (Medical/Dental) Paid -
Notes: Deny expense from U of L Health because the expense was paid by the SAEP. Place expense from U of L Physicians in abeyance for sixty (60) days to allow the claims investigator to verify any outstanding balance

CV-2024-00047/ [REDACTED] (Bissell Roberts)
[REDACTED]
Grant Award - \$738.60 (Medical/Dental) Paid -
Notes: Place expenses from U of L Health and ULP in abeyance for sixty (60) days to allow the claims investigator time to verify expenses once Claimant gives authorization

CV-2024-00084/ [REDACTED] (Lanola Parsons)
[REDACTED] on behalf of [REDACTED]
Grant Award - \$2,289.99 (Funeral/Burial) Paid -
Notes: \$1,565.00 for LOE and \$724.99 for F/B

CV-2024-00241/ [REDACTED] (Lanola Parsons)
[REDACTED] on behalf of [REDACTED]
Grant Award - \$7,778.00 (Funeral/Burial) Paid -
Notes:

CV-2024-00249/ [REDACTED] (Bissell Roberts)
[REDACTED] on behalf of [REDACTED]
Grant Award - \$840.00 (Mental Health (Includes Medical Related Medications)) Paid -

Notes:

Recommended Orders - Denials

CV-2024-00002/ [REDACTED] (Lanola Parsons)

Grant Award - \$0.00 (No proof of financial loss) Paid -

Notes: With leave to refile if she submits supporting documentation to the Board at a later time.

CV-2024-00046/ [REDACTED] (Lanola Parsons)

Grant Award - \$0.00 (Failure to Perfect Claim) Paid -

Notes:

CV-2024-00069/ [REDACTED] (Lanola Parsons)

on behalf of [REDACTED]

Grant Award - \$0.00 (Failure to Perfect Claim) Paid -

Notes:

CV-2024-00096/ [REDACTED] (Bissell Roberts)

on behalf of [REDACTED]

Grant Award - \$0.00 (Paid by other sources) Paid -

Notes: With leave to refile if Claimant can document she paid for part of victim's funeral

Sexual Assault Examination Awards

SA-2024-00234/Baptist Health

Hardin Hospital on behalf of [REDACTED]

Grant Award - \$1,030.00 Sexual Assault Exam Fee Paid -

Notes: Exam, Fac., Lab, Med-\$650; HIV Labs & Meds-\$380

SA-2024-00469/Baptist Health

Paducah on behalf of [REDACTED]

Grant Award - \$41.72 Sexual Assault Exam Fee Paid -

Notes: Balance after Insurance

SA-2024-00676/Baptist Health

Richmond on behalf of [REDACTED]

Grant Award - \$250.00 Sexual Assault Exam Fee Paid -

Notes: Exam, ER evaluation

SA-2024-00732/Baptist Health

Hardin Hospital on behalf of [REDACTED]

Grant Award - \$334.47 Sexual Assault Exam Fee Paid -

Notes: Exam-\$200; Fac.,\$13.35; Labs-\$303.02; Meds-\$18.10

SA-2024-00752/Baptist Health
Hardin Hospital on behalf of

[REDACTED]

Grant Award - \$667.02 Sexual Assault Exam Fee Paid -

Notes: Balance after Insurance

SA-2025-00039/CAC of the
Bluegrass on behalf of

[REDACTED]

Grant Award - \$894.00 Sexual Assault Exam Fee Paid -

Notes: CAC Fee

SA-2025-00049/CAC of the
Bluegrass on behalf of

[REDACTED]

Grant Award - \$894.00 Sexual Assault Exam Fee Paid -

Notes: CAC Fee

SA-2025-00033/Kentucky Clinic
Pharmacy on behalf of

[REDACTED]

Grant Award - \$230.00 Sexual Assault Exam Fee Paid -

Notes: HIV Initial Meds

SA-2025-00034/Kentucky Clinic
Pharmacy on behalf of

[REDACTED]

Grant Award - \$230.00 Sexual Assault Exam Fee Paid -

Notes: HIV Initial Meds

SA-2024-00675/Lake
Cumberland Regional Hospital
on behalf of

[REDACTED]

Grant Award - \$446.76 Sexual Assault Exam Fee Paid -

Notes: Exam-\$200; Labs-\$154.61; Fac.-\$92.15

SA-2024-00685/Lexington
SANE Program on behalf of

[REDACTED]

Grant Award - \$200.00 Sexual Assault Exam Fee Paid -

Notes: SANE Fee

SA-2024-00690/Medical Center
Bowling Green on behalf of

[REDACTED]

Grant Award - \$200.00 Sexual Assault Exam Fee Paid -

Notes: SANE Fee

SA-2024-00741/Medical Center
Bowling Green on behalf of

██████████

Grant Award - \$200.00 Sexual Assault Exam Fee Paid -

Notes: SANE Fee

SA-2025-00032/Murray
Calloway County Hospital on
behalf of

██████████

Grant Award - \$5.86 Sexual Assault Exam Fee Paid -

Notes: Balance after Insurance

SA-2024-00748/Northern
Kentucky CAC on behalf of

██████████

Grant Award - \$894.00 Sexual Assault Exam Fee Paid -

Notes: CAC Fee

SA-2025-00011/Norton
Audubon Hospital on behalf of

██████████

Grant Award - \$294.85 Sexual Assault Exam Fee Paid -

Notes: Balance after Insurance

SA-2025-00012/Norton
Childrens Hospital on behalf of

██████████

Grant Award - \$167.97 Sexual Assault Exam Fee Paid -

Notes: Balance after Insurance

SA-2024-00745/Norton
Pediatric SANE Program on
behalf of

██████████

Grant Award - \$200.00 Sexual Assault Exam Fee Paid -

Notes: SANE Fee

SA-2024-00746/Norton
Pediatric SANE Program on
behalf of

██████████

Grant Award - \$200.00 Sexual Assault Exam Fee Paid -

Notes: SANE Fee

SA-2024-00747/Norton
Pediatric SANE Program on
behalf of

██████████

Grant Award - \$200.00 Sexual Assault Exam Fee Paid -

Notes: SANE Fee

SA-2024-00749/Norton
Pediatric SANE Program on
behalf of [REDACTED]

Grant Award - \$200.00 Sexual Assault Exam Fee Paid -

Notes: SANE Fee

SA-2025-00035/Southeastern
Emergency Physicians, Inc. on
behalf of [REDACTED]

Grant Award - \$74.05 Sexual Assault Exam Fee Paid -

Notes: Triage

SA-2024-00689/St. Elizabeth
Healthcare on behalf of [REDACTED]
[REDACTED]

Grant Award - \$678.85 Sexual Assault Exam Fee Paid -

Notes: Exam-\$200; Fac.-\$116.04; Labs-\$362.81

SA-2024-00753/Still Waters
Center at Ampersand on behalf
of [REDACTED]

Grant Award - \$200.00 Sexual Assault Exam Fee Paid -

Notes: SANE Fee

SA-2024-00761/Still Waters
Center at Ampersand on behalf
of [REDACTED]

Grant Award - \$200.00 Sexual Assault Exam Fee Paid -

Notes: SANE Fee

SA-2025-00005/Still Waters
Center at Ampersand on behalf
of [REDACTED]

Grant Award - \$200.00 Sexual Assault Exam Fee Paid -

Notes: SANE Fee

SA-2025-00006/Still Waters
Center at Ampersand on behalf
of [REDACTED]

Grant Award - \$200.00 Sexual Assault Exam Fee Paid -

Notes: SANE Fee

SA-2025-00041/Still Waters
Center at Ampersand on behalf
of [REDACTED]

Grant Award - \$200.00 Sexual Assault Exam Fee Paid -

Notes: SANE Fee

SA-2024-00720/TJ Samson
Community Hospital on behalf
of [REDACTED]

Grant Award - \$733.37 Sexual Assault Exam Fee Paid -

Notes: Exam-\$200; Fac.-\$92.15; Labs-\$91.62; HIV Labs & Meds-\$350

SA-2025-00042/UK Healthcare
Hospitals on behalf of [REDACTED]
[REDACTED]

Grant Award - \$439.50 Sexual Assault Exam Fee Paid -

Notes: Fac.Fee-\$87.10; Labs -\$352.40

SA-2025-00013/University of
Louisville on behalf of [REDACTED]
[REDACTED]

Grant Award - \$200.00 Sexual Assault Exam Fee Paid -

Notes: SANE Fee

SA-2025-00014/University of
Louisville Hospital on behalf of
[REDACTED]

Grant Award - \$200.00 Sexual Assault Exam Fee Paid -

Notes: SANE Fee

SA-2025-00015/University of
Louisville on behalf of [REDACTED]
[REDACTED]

Grant Award - \$200.00 Sexual Assault Exam Fee Paid -

Notes: SANE Fee

SA-2025-00016/University of
Louisville Hospital on behalf of
[REDACTED]

Grant Award - \$200.00 Sexual Assault Exam Fee Paid -

Notes: SANE Fee

SA-2025-00017/University of
Louisville on behalf of [REDACTED]
[REDACTED]

Grant Award - \$200.00 Sexual Assault Exam Fee Paid -

Notes: SANE Fee

SA-2025-00018/University of
Louisville on behalf of [REDACTED]
[REDACTED]

Grant Award - \$200.00 Sexual Assault Exam Fee Paid -

Notes: SANE Fee

SA-2025-00019/University of
Louisville on behalf of

[REDACTED]

Grant Award - \$200.00 Sexual Assault Exam Fee Paid -

Notes: SANE Fee

SA-2025-00020/University of
Louisville on behalf of

[REDACTED]

Grant Award - \$200.00 Sexual Assault Exam Fee Paid -

Notes: SANE Fee

SA-2025-00021/University of
Louisville on behalf of

[REDACTED]

Grant Award - \$200.00 Sexual Assault Exam Fee Paid -

Notes: SANE Fee

SA-2025-00022/University of
Louisville on behalf of

[REDACTED]

Grant Award - \$200.00 Sexual Assault Exam Fee Paid -

Notes: SANE Fee

SA-2025-00023/University of
Louisville on behalf of

[REDACTED]

Grant Award - \$200.00 Sexual Assault Exam Fee Paid -

Notes: SANE Fee

SA-2025-00024/University of
Louisville on behalf of

[REDACTED]

Grant Award - \$200.00 Sexual Assault Exam Fee Paid -

Notes: SANE Fee

SA-2025-00025/University of
Louisville on behalf of

[REDACTED]

Grant Award - \$200.00 Sexual Assault Exam Fee Paid -

Notes: SANE Fee

SA-2025-00026/University of
Louisville on behalf of

[REDACTED]

Grant Award - \$200.00 Sexual Assault Exam Fee Paid -

Notes: SANE Fee

SA-2025-00027/University of
Louisville on behalf of [REDACTED]
[REDACTED]

Grant Award - \$200.00 Sexual Assault Exam Fee Paid -

Notes: SANE Fee

SA-2025-00028/University of
Louisville on behalf of [REDACTED]
[REDACTED]

Grant Award - \$200.00 Sexual Assault Exam Fee Paid -

Notes: SANE Fee

SA-2025-00029/University of
Louisville on behalf of [REDACTED]
[REDACTED]

Grant Award - \$200.00 Sexual Assault Exam Fee Paid -

Notes: SANE Fee

SA-2025-00030/University of
Louisville on behalf of [REDACTED]
[REDACTED]

Grant Award - \$200.00 Sexual Assault Exam Fee Paid -

Notes: SANE Fee

Sexual Assault Examination Denials

SA-2024-00531/Baptist Health
Hardin Hospital on behalf of
[REDACTED]

Grant Award - \$0.00 Not compensated under KRS 49 Paid -

Notes: Not compensated Under KRS 49

SA-2024-00573/Baptist Health
Paducah on behalf of [REDACTED]
[REDACTED]

Grant Award - \$0.00 Insurance Paid -

Notes: DENY - Insurance Paid

SA-2024-00579/Baptist Health
Richmond on behalf of [REDACTED]
[REDACTED]

Grant Award - \$0.00 Insurance Paid -

Notes: DENY - Insurance Paid

SA-2024-00582/Baptist Health
Paducah on behalf of [REDACTED]

Grant Award - \$0.00 Insurance Paid -

Notes: DENY - Insurance Paid

SA-2024-00706/Baptist Health
Corbin on behalf of [REDACTED]

Grant Award - \$0.00 Insurance Paid -

Notes: DENY - Insurance Paid

SA-2024-00652/Jennie Stuart
Medical Center on behalf of [REDACTED]

Grant Award - \$0.00 Insurance Paid -

Notes: DENY - Insurance Paid

SA-2024-00695/Lake
Cumberland Regional Hospital
on behalf of [REDACTED]

Grant Award - \$0.00 Failure to Perfect Claim Paid -

Notes: Hospital could not find any info for this patient. Patient could have given false info.

SA-2024-00513/Medical Center
Bowling Green on behalf of [REDACTED]

Grant Award - \$0.00 Insurance Paid -

Notes: DENY - Insurance Paid

SA-2024-00561/Medical Center
Bowling Green on behalf of [REDACTED]

Grant Award - \$0.00 Insurance Paid -

Notes: DENY - Insurance Paid

SA-2024-00597/Medical Center
Bowling Green on behalf of [REDACTED]

Grant Award - \$0.00 Insurance Paid -

Notes: DENY - Insurance Paid

SA-2024-00622/Medical Center
Bowling Green on behalf of [REDACTED]

Grant Award - \$0.00 Insurance Paid -

Notes: DENY - Insurance Paid

SA-2024-00661/Medical Center
Bowling Green on behalf of

[REDACTED]

Grant Award - \$0.00 Insurance Paid -

Notes: DENY - Insurance Paid

SA-2024-00755/Medical Center
Bowling Green on behalf of

[REDACTED]

Grant Award - \$0.00 Insurance Paid -

Notes: DENY - Insurance Paid

SA-2024-00482/Mercy Health
Lourdes - Paducah on behalf of

[REDACTED]

Grant Award - \$0.00 Insurance Paid -

Notes: DENY - Insurance Paid

SA-2024-00673/Mercy Health
Lourdes - Paducah on behalf of

[REDACTED]

Grant Award - \$0.00 Insurance Paid -

Notes: DENY - Insurance Paid

SA-2024-00680/Mercy Health
Lourdes - Paducah on behalf of

[REDACTED]

Grant Award - \$0.00 Insurance Paid -

Notes: DENY - Medicaid paid total of \$23,581.52

SA-2025-00031/Murray
Calloway County Hospital on
behalf of

[REDACTED]

Grant Award - \$0.00 Insurance Paid -

Notes: DENY - Insurance Paid

SA-2024-00660/St. Joseph
London on behalf of

[REDACTED]

Grant Award - \$0.00 Insurance Paid -

Notes: DENY - Insurance Paid

SA-2024-00721/St. Joseph
London on behalf of

[REDACTED]

Grant Award - \$0.00 Insurance Paid -

Notes: DENY - Insurance Paid

SA-2025-00038/UK Healthcare
Hospitals on behalf of [REDACTED]
[REDACTED]

Grant Award - \$0.00

Insurance

Paid -

Notes: DENY - Insurance Paid
