



**Andy Beshear**  
GOVERNOR

**Jacqueline Coleman**  
LIEUTENANT GOVERNOR

**PUBLIC PROTECTION CABINET**  
**Kentucky Office of Claims and Appeals**

**Crime Victims Compensation Board**  
500 Mero Street, 2SC1  
Frankfort, KY 40601  
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**Ray A. Perry**  
SECRETARY

**DJ Wasson**  
DEPUTY SECRETARY

**John Hardesty**  
EXECUTIVE DIRECTOR

## NOTICE OF REGULAR MEETING

Date: October 8, 2024

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

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

- Call to Order and Roll Call
- Approval of September 2024 Minutes
- Executive Director's Report
- For Instructions from the Board
- Recommended Orders - Awards
- Recommended Orders - Denials
- Sexual Assault Examination – Awards
- Sexual Assault Examination - Denials
- Scheduling of November 2024 meeting
- Adjournment

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**Office Of Claims And Appeals**  
**Crime Victims Compensation Board**  
**Agenda**

October 8, 2024

Total  
Claims: 114

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Executive Director Hardesty reported to the Board that for September 2024:

Crime Victims Compensation:

70 claims were received  
70 claims were set up  
23 full investigations were completed  
9 emergency investigations were completed  
73 claims were assigned/reassigned to investigators  
25 claims were awarded  
Total Awarded: \$138,918.60 (includes additional and emergency awards)  
2 additional awards were rendered  
12 claims were denied

Restitution and Collections:

\$7,033.43 received in restitution  
\$318.81 received in donations  
\$0.00 received through subrogation  
\$1,961.57 received through PIECP program  
\$9,313.81 total received

The Sexual Assault Examination Program:

82 claims were received  
82 claims were set up  
73 claims were awarded  
Total Awarded: \$35,044.54  
16 claims were denied

127 total claims were decided by the Board for September 2024.

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**For Instructions From the Board**

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CV-2020-00186/ [REDACTED] (Amy Leenerts)  
on behalf of [REDACTED]

Grant Award - \$14,239.56 (Medical/Dental) Paid -

Notes: Held over from September 2024 agenda

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CV-2023-00355/ [REDACTED] (Bissell Roberts)  
on behalf of [REDACTED]

Grant Award - \$0.00 (Conduct) Paid -

Notes: Discussion and review of claim by full Board

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CV-2024-00148/ [REDACTED] (Lanola Parsons)  
[REDACTED] on behalf of [REDACTED]

Grant Award - \$600.00 (Funeral/Burial) Paid -

Notes:

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CV-2024-00295/ [REDACTED] (Amy Leenerts)  
Grant Award - \$0.00 (Claim Withdrawn) Paid -  
Notes: R/O to withdraw claim per Claimant's request

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**Recommended Orders - Awards**

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CV-2023-00155/ [REDACTED] (Amy Leenerts)  
Grant Award - \$1,050.00 (Medical/Dental) Paid -  
Notes:

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CV-2023-00172/ [REDACTED] (Lanola Parsons)  
Grant Award - \$1,595.70 (Medical/Dental) Paid -  
Notes: Denial for MH and LOE due to expenses not being confirmed as being necessary due to crime. With leave to refile.

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CV-2023-00244/ [REDACTED] (Bissell Roberts)  
Grant Award - \$395.00 (Medical/Dental) Paid -  
Notes:

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CV-2023-00256/ [REDACTED] (Lanola Parsons)  
Grant Award - \$106.77 (Mental Health (Includes Medical Related Medications)) Paid -  
Notes: R/O Granting an Additional Award

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CV-2023-00350/ [REDACTED] (Amy Leenerts)  
[REDACTED] on behalf of [REDACTED]  
Grant Award - \$4,278.28 (Economic Support (Lost Wages/Support)) Paid -  
Notes:

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CV-2024-00016/ [REDACTED] (Lanola Parsons)  
Grant Award - \$14,207.00 (Economic Support (Lost Wages/Support)) Paid -  
Notes: \$14,000.00 for LOE and \$207.00 for outstanding M/D. Denial for grocery bills and money transfer expenses because they are not compensable under KRS 49.370.

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CV-2024-00029/ [REDACTED] (Amy Leenerts)  
Grant Award - \$2,114.39 (Medical/Dental) Paid -  
Notes: \$1,500.00 for LOE, \$386.90 for OOP M/D, and \$227.49 for outstanding M/D. Denial for EOB's totaling \$1,939.33 for services provided from Baptist Health, Bluegrass Orthopedics, and Lexington-Fayette Urban County Government because no itemized bills were submitted and, thus, could not be determined crime related. Claimant shall be granted leave to refile this amount at a later date if she submits itemized billing statements for this amount.

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CV-2024-00050/ [REDACTED] (Lanola Parsons)  
Grant Award - \$1,000.00 (Economic Support (Lost Wages/Support)) Paid -  
Notes:

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CV-2024-00074/ [REDACTED] (Amy Leenerts)  
[REDACTED]  
Grant Award - \$717.00 (Medical/Dental) Paid -

Notes:

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CV-2024-00076/ [REDACTED] (Lanola Parsons)  
on behalf of [REDACTED]  
Grant Award - \$1,145.78 (Economic Support (Lost Wages/Support)) Paid -

Notes:

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CV-2024-00127/ [REDACTED] (Bissell Roberts)  
on behalf of [REDACTED]  
Grant Award - \$5,979.00 (Funeral/Burial) Paid -

Notes:

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CV-2024-00131/ [REDACTED] (Lanola Parsons)  
on behalf of [REDACTED]  
Grant Award - \$3,262.17 (Funeral/Burial) Paid -

Notes:

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CV-2024-00200/ [REDACTED] (Amy Leenerts)  
[REDACTED] on behalf of [REDACTED]  
Grant Award - \$9,000.00 (Funeral/Burial) Paid -

Notes: Denial for burial suit request because it was not part of the funeral service contract.

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CV-2024-00202/ [REDACTED] (Amy Leenerts)  
Grant Award - \$1,770.00 (Mental Health (Includes Medical Related Medications)) Paid -

Notes: R/O Granting an Additional Award

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### Recommended Orders - Denials

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CV-2023-00134/ [REDACTED] (Bissell Roberts)  
[REDACTED]  
Grant Award - \$0.00 (No proof of financial loss) Paid -

Notes: With leave to refile if Claimant submits sufficient documentation to substantiate claim

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CV-2023-00242/ [REDACTED] (Bissell Roberts)  
Grant Award - \$0.00 (No proof of financial loss) Paid -

Notes: With leave to refile if Claimant submits all required documentation to substantiate claim

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CV-2023-00252/ [REDACTED] (Lanola Parsons)  
Grant Award - \$0.00 (No proof of financial loss) Paid -

Notes: With leave to refile if Claimant submits all required documentation to substantiate claim

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CV-2023-00270/ [REDACTED] (Amy Leenerts)  
[REDACTED]  
Grant Award - \$0.00 (No proof of financial loss) Paid -

Notes: With leave to refile if Claimant submits all required documentation to substantiate claim

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CV-2023-00294/ [REDACTED] (Bissell Roberts)  
on behalf of [REDACTED]  
Grant Award - \$0.00 (Failure to Perfect Claim) Paid -

Notes: With leave to refile if Claimant submits all required documentation to substantiate claim

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CV-2023-00313/ [REDACTED] (Amy Leenerts)  
Grant Award - \$0.00 (Failure to Perfect Claim) Paid -

Notes:

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CV-2023-00318/ [REDACTED] (Bissell Roberts)  
Grant Award - \$0.00 (Failure to Perfect Claim) Paid -

Notes: With leave to refile if Claimant submits all required documentation to substantiate claim

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CV-2023-00360/ [REDACTED] (Bissell Roberts)  
[REDACTED] on behalf of [REDACTED]  
Grant Award - \$0.00 (No proof of financial loss) Paid -

Notes: With leave to refile if Claimant submits all required documentation to substantiate claim

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CV-2024-00072/ [REDACTED] (Lanola Parsons)  
[REDACTED] on behalf of [REDACTED]  
Grant Award - \$0.00 (No proof of financial loss) Paid -

Notes: With leave to refile if victim submits all required documentation to substantiate claim

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CV-2024-00170/ [REDACTED] (Bissell Roberts)  
Grant Award - \$0.00 (No proof of financial loss) Paid -

Notes: With leave to refile if Claimant submits all required documentation to substantiate claim

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CV-2024-00215/ [REDACTED] (Lanola Parsons)  
Grant Award - \$0.00 (Failure to Perfect Claim) Paid -

Notes: Claim may be revived if Claimant submits all required documentaiton to substantiate claim

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CV-2024-00355/ [REDACTED] (Amy Leenerts)  
Grant Award - \$0.00 (Property loss only) Paid -

Notes:

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### Sexual Assault Examination Awards

SA-2024-00107/Baptist Health  
Louisville on behalf of [REDACTED]  
[REDACTED]

Grant Award - \$635.18 Sexual Assault Exam Fee Paid -

Notes: Exam, Fac., Lab, Med-\$650; HIV Labs & Meds-\$380.00; Less Insurance Paid-\$394.18

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SA-2024-00232/Baptist Health  
Hardin Hospital on behalf of

██████████

Grant Award - \$170.07                      Sexual Assault Exam Fee                      Paid -

Notes: Balance after Insurance

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SA-2024-00235/Baptist Health  
Hardin Hospital on behalf of

██████████

Grant Award - \$81.64                      Sexual Assault Exam Fee                      Paid -

Notes: Balance after Insurance

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SA-2024-00252/Baptist Health  
Richmond on behalf of

██████████

Grant Award - \$349.11                      Sexual Assault Exam Fee                      Paid -

Notes: Balance after Insurance

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SA-2024-00266/Baptist Health  
Hardin Hospital on behalf of

██████████

Grant Award - \$12.50                      Sexual Assault Exam Fee                      Paid -

Notes: Balance after Insurance

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SA-2024-00292/Baptist Health  
Paducah on behalf of

██████████

Grant Award - \$358.24                      Sexual Assault Exam Fee                      Paid -

Notes: Balance after Insurance

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SA-2024-00300/Baptist Health  
LaGrange on behalf of

██████████

Grant Award - \$392.17                      Sexual Assault Exam Fee                      Paid -

Notes: Balance after Insurance

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SA-2024-00301/Baptist Health  
Hardin Hospital on behalf of

██████████

Grant Award - \$249.83                      Sexual Assault Exam Fee                      Paid -

Notes: Balance after Insurance

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SA-2024-00303/Baptist Health  
Hardin Hospital on behalf of

██████████

Grant Award - \$104.81                      Sexual Assault Exam Fee                      Paid -

Notes: Balance after Insurance

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SA-2024-00307/Baptist Health  
Hardin Hospital on behalf of

██████████

Grant Award - \$1,126.72                      Sexual Assault Exam Fee                      Paid -

Notes: Balance after Insurance

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SA-2024-00407/Baptist Health  
Paducah on behalf of

██████████

Grant Award - \$650.00                      Sexual Assault Exam Fee                      Paid -

Notes: Exam, Fac., Lab, Med

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SA-2024-00451/Barren River  
Area Child Advocacy Center on  
behalf of

██████████

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

Notes: CAC Fee

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SA-2024-00454/Barren River  
Area Child Advocacy Center on  
behalf of

██████████

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

Notes: CAC Fee

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SA-2024-00483/CAC of the  
Bluegrass on behalf of

██████████

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

Notes: CAC Fee

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SA-2024-00485/CAC of the  
Bluegrass on behalf of

██████████

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

Notes: CAC Fee

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SA-2024-00486/CAC of the  
Bluegrass on behalf of

██████████

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

Notes: CAC Fee

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SA-2024-00461/Cincinnati  
Children's Hospital Medical  
Center on behalf of

██████████

Grant Award - \$450.00                      Sexual Assault Exam Fee                      Paid -

Notes: Exam, Fac.

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SA-2024-00520/Cumberland  
Valley Childrens Advocacy on  
behalf of [REDACTED]

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

Notes: CAC Fee

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SA-2024-00521/Cumberland  
Valley Childrens Advocacy on  
behalf of [REDACTED]

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

Notes: CAC Fee

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SA-2024-00466/Gateway CAC  
on behalf of [REDACTED]

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

Notes: CAC Fee

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SA-2024-00442/Good  
Samaritan Hospital on behalf of  
[REDACTED]

Grant Award - \$571.09                      Sexual Assault Exam Fee                      Paid -

Notes: Balance after Insurance

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SA-2024-00490/Kentucky Clinic  
Pharmacy on behalf of  
[REDACTED]

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

Notes: HIV Initial & Anti-Nausea Meds

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SA-2024-00492/Kentucky Clinic  
Pharmacy on behalf of  
[REDACTED]

Grant Award - \$44.51                      Sexual Assault Exam Fee                      Paid -

Notes: Balance after Insurance

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SA-2024-00495/Kentucky Clinic  
Pharmacy on behalf of [REDACTED]  
[REDACTED]

Grant Award - \$10.55                      Sexual Assault Exam Fee                      Paid -

Notes: Balance after Insurance

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SA-2024-00496/Kentucky Clinic  
Pharmacy on behalf of [REDACTED]  
[REDACTED]

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

Notes: HIV Initial Meds

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SA-2024-00452/King's  
Daughters Medical on behalf of

██████████

Grant Award - \$2,637.72                      Sexual Assault Exam Fee                      Paid -

Notes: Exam, Fac., Lab, Meds-\$@650; CT Head Scan-\$1,336.09; CT Spine-\$260.50; Radiology-\$390.75

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SA-2024-00468/LOTUS on  
behalf of

██████████

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

Notes: CAC Fee

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SA-2024-00491/Meadowview  
Regional Medical Center on  
behalf of

██████████

Grant Award - \$297.85                      Sexual Assault Exam Fee                      Paid -

Notes: Balance after Insurance

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SA-2024-00522/Meadowview  
Regional Medical Center on  
behalf of

██████████

Grant Award - \$698.37                      Sexual Assault Exam Fee                      Paid -

Notes: Exam, Fac., Lab, Med-\$650.00; HIV Labs & Meds-\$380.00; Less Insurance-Payment \$331.63

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SA-2024-00445/Medical Center  
Bowling Green on behalf of

██████████

Grant Award - \$450.00                      Sexual Assault Exam Fee                      Paid -

Notes: Exam, Fac.

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SA-2024-00462/Northern  
Kentucky Children's Advocacy  
Center of St. Luke Hospital on  
behalf of

██████████

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

Notes: CAC Fee

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SA-2024-00463/Northern  
Kentucky CAC on behalf of

██████████

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

Notes: CAC Fee

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SA-2024-00477/Owensboro  
Health Muhlenberg Community  
Hospital on behalf of [REDACTED]  
[REDACTED]

Grant Award - \$497.62                      Sexual Assault Exam Fee                      Paid -

Notes: Balance after Insurance

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SA-2024-00458/Pennyrile  
Children's Advocacy Center on  
behalf of [REDACTED]

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

Notes: CAC Fee

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SA-2024-00460/Southeastern  
Emergency Physicians, Inc. on  
behalf of [REDACTED]

Grant Award - \$200.00                      Triage                      Paid -

Notes: Exam Fee

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SA-2024-00480/Southeastern  
Emergency Services on behalf  
of [REDACTED]

Grant Award - \$74.05                      Triage                      Paid -

Notes: Triage

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SA-2024-00446/St. Elizabeth  
Healthcare on behalf of [REDACTED]  
[REDACTED]

Grant Award - \$450.00                      Sexual Assault Exam Fee                      Paid -

Notes: Exam, Fac.

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SA-2024-00453/St. Elizabeth  
Healthcare on behalf of [REDACTED]  
[REDACTED]

Grant Award - \$550.00                      Sexual Assault Exam Fee                      Paid -

Notes: Exam, Fac., Lab

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SA-2024-00484/St. Elizabeth  
Healthcare on behalf of [REDACTED]  
[REDACTED]

Grant Award - \$686.14                      Sexual Assault Exam Fee                      Paid -

Notes: Exam-\$200; Fac-\$250; Labs-\$112.07; Meds-\$124.06

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SA-2024-00443/St. Joseph  
Hospital on behalf of [REDACTED]  
[REDACTED]

Grant Award - \$450.00                      Sexual Assault Exam Fee                      Paid -

Notes: Fac., Lab, Meds

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SA-2024-00456/Still Waters  
Center at Ampersand on behalf  
of [REDACTED]

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

Notes: SANE Fee

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SA-2024-00459/Still Waters  
Center at Ampersand on behalf  
of [REDACTED]

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

Notes: SANE Fee

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SA-2024-00487/Still Waters  
Center at Ampersand on behalf  
of [REDACTED]

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

Notes: SANE Fee

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SA-2024-00489/Still Waters  
Center at Ampersand on behalf  
of [REDACTED]

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

Notes: SANE Fee

---

SA-2024-00494/Still Waters  
Center at Ampersand on behalf  
of [REDACTED]

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

Notes: SANE Fee

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SA-2024-00138/TJ Samson  
Community Hospital on behalf  
of [REDACTED]

Grant Award - \$322.13                      Sexual Assault Exam Fee                      Paid -

Notes: Balance after Insurance

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SA-2024-00429/TJ Samson  
Community Hospital on behalf  
of [REDACTED]

Grant Award - \$450.00                      Sexual Assault Exam Fee                      Paid -

Notes: Fac., Lab, Med - \$450

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SA-2024-00426/Tristar  
Greenvview Regional Hospital on  
behalf of [REDACTED]

Grant Award - \$106.00                      Sexual Assault Exam Fee                      Paid -

Notes: Balance aftr Insurance

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SA-2024-00449/Tristar  
Greenview Regional Hospital on  
behalf of [REDACTED]

Grant Award - \$550.00                      Sexual Assault Exam Fee                      Paid -

Notes: Exam, Fac., Meds

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SA-2024-00518/Tristar  
Greenview Regional Hospital on  
behalf of [REDACTED]

Grant Award - \$813.32                      Strangulation Assessment                      Paid -

Notes: Exam-\$200; Fac-\$250; Labs-\$263.32; Meds-\$100

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SA-2024-00470/University of  
Louisville on behalf of [REDACTED]  
[REDACTED]

Grant Award - \$550.00                      Sexual Assault Exam Fee                      Paid -

Notes: Exam, Fac., Med

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SA-2024-00471/University of  
Louisville on behalf of [REDACTED]  
[REDACTED]

Grant Award - \$450.00                      Sexual Assault Exam Fee                      Paid -

Notes: Exam, Fac.

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SA-2024-00473/University of  
Louisville on behalf of [REDACTED]  
[REDACTED]

Grant Award - \$650.00                      Sexual Assault Exam Fee                      Paid -

Notes: Exam, Fac., Lab, Med

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SA-2024-00476/University of  
Louisville on behalf of [REDACTED]  
[REDACTED]

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

Notes: SANE Fee

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SA-2024-00498/University of  
Louisville on behalf of [REDACTED]  
[REDACTED]

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

Notes: SANE Fee

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SA-2024-00499/University of  
Louisville on behalf of [REDACTED]  
[REDACTED]

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

Notes: SANE Fee

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SA-2024-00500/University of  
Louisville on behalf of [REDACTED]  
[REDACTED]

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

Notes: SANE Fee

---

SA-2024-00501/University of  
Louisville on behalf of [REDACTED]  
[REDACTED]

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

Notes: SANE Fee

---

SA-2024-00502/University of  
Louisville on behalf of [REDACTED]  
[REDACTED]

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

Notes: SANE Fee

---

SA-2024-00503/University of  
Louisville on behalf of [REDACTED]  
[REDACTED]

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

Notes: SANE Fee

---

SA-2024-00504/University of  
Louisville on behalf of [REDACTED]  
[REDACTED]

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

Notes: SANE Fee

---

SA-2024-00505/University of  
Louisville on behalf of [REDACTED]  
[REDACTED]

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

Notes: SANE Fee

---

SA-2024-00506/University of  
Louisville on behalf of [REDACTED]  
[REDACTED]

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

Notes: SANE Fee

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SA-2024-00507/University of  
Louisville on behalf of [REDACTED]  
[REDACTED]

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

Notes: SANE Fee

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SA-2024-00508/University of  
Louisville on behalf of [REDACTED]

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

Notes: SANE Fee

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SA-2024-00509/University of  
Louisville on behalf of [REDACTED]

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

Notes: SANE Fee

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SA-2024-00510/University of  
Louisville on behalf of [REDACTED]

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

Notes: SANE Fee

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SA-2024-00511/University of  
Louisville on behalf of [REDACTED]

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

Notes: SANE Fee

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SA-2024-00512/University of  
Louisville on behalf of [REDACTED]

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

Notes: SANE Fee

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SA-2024-00515/University of  
Louisville on behalf of [REDACTED]

Grant Award - \$650.00                      Sexual Assault Exam Fee                      Paid -

Notes: Exam, Fac., Lab, Med

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SA-2024-00516/University of  
Louisville on behalf of [REDACTED]

Grant Award - \$627.30                      Sexual Assault Exam Fee                      Paid -

Notes: Exam, Fac., Lab, Med

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SA-2024-00519/University of  
Louisville on behalf of [REDACTED]

Grant Award - \$650.00                      Sexual Assault Exam Fee                      Paid -

Notes: Exam, Fac., Lab, Med

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### **Sexual Assault Examination Denials**

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SA-2024-00257/Baptist Health  
Lexington on behalf of [REDACTED]  
[REDACTED]

Grant Award - \$0.00 Insurance Paid -

Notes: DENYY - Insurance Paid \$9,294.90

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SA-2024-00260/Baptist Health  
Paducah on behalf of [REDACTED]  
[REDACTED]

Grant Award - \$0.00 Insurance Paid -

Notes: DENY - Insurance Paid \$1,140.26

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SA-2024-00291/Baptist Health  
Richmond on behalf of [REDACTED]  
[REDACTED]

Grant Award - \$0.00 Insurance Paid -

Notes: DENY - Insurance Paid

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SA-2024-00345/Baptist Health  
Richmond on behalf of [REDACTED]  
[REDACTED]

Grant Award - \$0.00 Insurance Paid -

Notes: DENY - Insurance Paid

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SA-2024-00427/Baptist Health  
Paducah on behalf of [REDACTED]  
[REDACTED]

Grant Award - \$0.00 Insurance Paid -

Notes: DENY - Insurance Paid \$1,343.20

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SA-2024-00182/Frankfort  
Regional Medical Center on  
behalf of [REDACTED]

Grant Award - \$0.00 Insurance Paid -

Notes: DENY-Paid by Charity

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SA-2024-00525/Harrison  
Memorial Hospital on behalf of [REDACTED]  
[REDACTED]

Grant Award - \$0.00 Insurance Paid -

Notes: DENY - Insurance Paid

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SA-2024-00202/Medical Center  
Bowling Green on behalf of [REDACTED]  
[REDACTED]

Grant Award - \$0.00 Insurance Paid -

Notes: DENY - Insurance Paid

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SA-2024-00326/Medical Center  
Bowling Green on behalf of  
[REDACTED]

Grant Award - \$0.00                      Insurance                      Paid -

Notes: DENY - Insurance Paid

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SA-2024-00479/Murray  
Calloway County Hospital on  
behalf of [REDACTED]

Grant Award - \$0.00                      Insurance                      Paid -

Notes: DENY - Insurance Paid \$2,297.34

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SA-2024-00523/Norton  
Childrens Hospital on behalf of  
[REDACTED]

Grant Award - \$0.00                      Insurance                      Paid -

Notes: DENY - Insurance Paid

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SA-2024-00435/St. Claire  
Medical Center on behalf of  
[REDACTED]

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

Notes: DENY - Inmate

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