

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 Phone: (502) 782-8255 Fax: (502) 573-4817

Ray A. Perry SECRETARY

DJ WassonDEPUTY SECRETARY

Allyson Taylor EXECUTIVE DIRECTOR

NOTICE OF REGULAR MEETING

Date: October 14, 2025

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

Location: Microsoft Teams

- Call to order and roll call
- Approval of September 2025 Minutes
- Executive Director's Report
- Discussion on revised bereavement leave policy
- Reminder of regulatory training
- Discussion on possibly calling special sessions
- For Instructions from the Board
- Recommended Orders Awards
- Recommended Orders Denials
- Sexual Assault Examination Awards
- Sexual Assault Examination Denials
- Scheduling of November 2025 meeting
- Adjournment

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Office Of Claims And Appeals

Crime Victims Compensation Board Agenda

October 14, 2025

Total Claims:

117

Executive Director Taylor reported to the Board that for September 2025:

Crime Victims Compensation:

73 claims were received

73 claims were set up

85 full investigations were completed

14 emergency investigations were completed

79 claims were assigned/reassigned to investigators

32 claims were awarded

Total Awarded: \$326,966.82 (includes additional and emergency awards)

0 additional awards were rendered

15 claims were denied

0 debt appeals were decided

6 claim was ordered withdrawn

Restitution and Collections:

\$8,289.05 Received in restitution \$873.83 Received in donations

\$0 Received through subrogation \$1,450.11 Received through PIECP program \$10,612.99 Total received for September 2025

The Sexual Assault Examination Program:

72 claims were received

72 claims were set up

64 claims were awarded

Total Awarded: \$20,887.34

21 claims were denied

139 total claims were decided by the Board for September 2025

For Instructions From the Board

CV-2021-00200/ on behalf of (Amy Leenerts)

Grant Award - \$0.00

(Medical/Dental)

Paid -

Notes: R/O on Appeal for Harlan McIntosh #130831

Grant Award - \$0.00

(Medical/Dental)

Paid -

Notes: Recommended Order on Appeal for

Harlan McInosh (#130831) | KY State Penitentiary - Eddyville

Page: 1/15

CV-2024-00188/ (Bissell Roberts) on behalf of Grant Award - \$0.00 Paid -(Medical/Dental) Notes: Recommended to be placed in ABEYANCE to allow the victim an opportunity to authorize Board staff to speak to the medical providers on his behalf. **Recommended Orders - Awards** CV-2024-00089/ (Bissell Roberts) behalf of Grant Award - \$1,075.00 (Mental Health (Includes Medical Related Paid -Medications)) Notes: LiveWell Behavioral Health \$1,075.00 (Additional Award) (Bissell Roberts) CV-2024-00125/ on behalf of Grant Award - \$210.00 Paid -(Mental Health (Includes Medical Related Medications)) Notes: Norton Healthcare \$180.00 \$30.00 CV-2024-00299/ (Bissell Roberts) on behalf of Grant Award - \$10,000.00 (Funeral/Burial) Paid -Notes: CV-2024-00301/ (Bissell Roberts) on behalf of Grant Award - \$5,989.00 (Funeral/Burial) Paid -Notes: OOP for brother's funeral CV-2024-00319/ (Bissell Roberts) Grant Award - \$6,190.55 (Medical/Dental) Paid -Notes: \$2,517.35 U of L Physicians \$95.86 U of L Health Jewish Med Center East \$1,269.88 U of L Health Jewish Med Center East \$826.95 U of L Health Jewish Med Center East \$826.95 Business Revenue Systems \$90.26 Team Health \$563.30 CV-2024-00327/ (Hilary Sykes) Grant Award - \$2,246.26 (Economic Support (Lost Wages/Support)) Notes: Lost Wages AWARDED; Medical expenses DENIED but shall be able to revive should claimant provide necessary proof.

| | (Lanola Parsons) | |
|--|---|--|
| (Medical/Dental) | Paid - | |
| ounty EMS \$2,246.00 | | |
| | (Bissell Roberts) | |
| (Medical/Dental) | Paid - | |
| ections) \$10,407.54 | | |
| 1 | (Hilary Sykes) | |
| (Funeral/Burial) | Paid - | |
| Funeral/Burial) e - DENIED H LEAVE TO REFILE | | |
| | (Hilary Sykes) | |
| (Mental Health (Includes Medical Related Medications)) | Paid - | |
| 60.00 \$63.60 ABEYANCE for 60 days | | |
| | (Hilary Sykes) | |
| (Funeral/Burial) | Paid - | |
| 5,588.04 | | |
| | (Hilary Sykes) | |
| (Mental Health (Includes Medical Related Medications)) | Paid - | |
| 00 (Mental Health) se Key Replacement) | | |
| | (Hilary Sykes) | |
| (Funeral/Burial) | Paid - | |
| Notes: \$4,200.00 | | |
| | (Hilary Sykes) | |
| (Funeral/Burial) | Paid - | |
| 17.00 | | |
| | (Medical/Dental) ections) \$10,407.54 (Funeral/Burial) Funeral/Burial) e - DENIED H LEAVE TO REFILE (Mental Health (Includes Medical Related Medications)) 22,000.00 60.00 \$63.60 ABEYANCE for 60 days (Funeral/Burial) 6,588.04 (Mental Health (Includes Medical Related Medications)) 00 (Mental Health) se Key Replacement) (Funeral/Burial) | |

| CV-2024-00515/ on behalf of | | (Lanola Parsons) |
|--|--|-------------------|
| Grant Award - \$4,657.00 | (Funeral/Burial) | Paid - |
| Notes: \$3,400.0 Muldoon Memorials \$1,275.00 | | |
| CV-2024-00582/ on behalf of | | (Bissell Roberts) |
| Grant Award - \$500.00 | (Funeral/Burial) | Paid - |
| Notes: \$500.00 | | |
| CV-2025-00084/ | | (Bissell Roberts) |
| Grant Award - \$333.11 | (Medical/Dental) | Paid - |
| Notes: Hazard ARH Regional M \$80.00 | edical Center \$253.11 | |
| CV-2025-00163/ | | (Lanola Parsons) |
| Grant Award - \$241.92 | (Medical/Dental) | Paid - |
| Notes: To replace eyeglasses w \$241.92 | hich were destoryed due to the crime. | |
| CV-2025-00292/ on behalf of | | (Lanola Parsons) |
| Grant Award - \$3,760.00 | (Funeral/Burial) | Paid - |
| Notes: \$3,760 | 0.00 | |
| CV-2025-00294/ | | (Lanola Parsons) |
| Grant Award - \$765.93 | (Medical/Dental) | Paid - |
| Notes: Jessamine County Ambu Carepayment Collections \$653. | | |
| CV-2025-00363/ on behalf of | | (Lanola Parsons) |
| Grant Award - \$3,445.00 | (Funeral/Burial) | Paid - |
| Notes: \$3,445.00 | | |
| Recommended Orders - | Denials | |
| CV-2024-00172/ | | (Bissell Roberts) |
| Grant Award - \$0.00 | (Not employed at time of crime) Paid - | |
| Notes: | | |
| CV-2024-00210/ | | (Bissell Roberts) |
| Grant Award - \$0.00 | (Not compensated under KRS 49) | Paid - |

Notes: Compensation for pain and suffering DENIED because the Board does not possess statutory authority to provide such compensation. Further recommended that claim for lost earning be placed in ABEYANCE to give the claimant an opportunity to obtain her W2s, paystubs, or other wage documentation.

| CV-2024-00240/ | | (Lanola Parsons) |
|---|-----------------------------|-------------------|
| Cront Award (CO OO | (Failure to Perfect Clairs) | Doid |
| Grant Award - \$0.00 Notes: Failure to Perfect | (Failure to Perfect Claim) | Paid - |
| | | (Piggall Pobarta) |
| CV-2024-00243/ on behalf of | | (Bissell Roberts) |
| Grant Award - \$0.00 | (Failure to Perfect Claim) | Paid - |
| Notes: | | |
| CV-2024-00251/ | | (Bissell Roberts) |
| Grant Award - \$0.00 | (Failure to Perfect Claim) | Paid - |
| Notes: Failure to Perfect Lost V | √ages | |
| CV-2024-00316/ | | (Bissell Roberts) |
| Grant Award - \$0.00 | (Failure to Perfect Claim) | Paid - |
| Notes: | | |
| CV-2024-00339/ on behalf of | | (Bissell Roberts) |
| Grant Award - \$0.00 | (Failure to Perfect Claim) | Paid - |
| Notes: Denied with leave to refi | le | |
| CV-2024-00356/ | | (Bissell Roberts) |
| Grant Award - \$0.00 | (Failure to Perfect Claim) | Paid - |
| Notes: Failure to perfect with le | ave to refile | |
| CV-2024-00363/ on behalf of | | (Bissell Roberts) |
| Grant Award - \$0.00 | (Failure to Perfect Claim) | Paid - |
| Notes: Failure to perfect with leave to refile. | | |
| CV-2024-00364/ on behalf of | | (Bissell Roberts) |
| Grant Award - \$0.00 | (Failure to Perfect Claim) | Paid - |
| Notes: Failure to Perfect; Denied with leave to refile. | | |
| CV-2024-00367/ | | (Bissell Roberts) |
| Grant Award - \$0.00 | (Failure to Perfect Claim) | Paid - |

Notes: Failure to perfect with leave to refile. CV-2024-00398/ (Bissell Roberts) Paid -Grant Award - \$0.00 (Not compensated under KRS 49) Notes: Denied with claim to refile as a property loss claim; claimant may reopen claim should they have any expenses that fall within the Board's jurisdiction. CV-2024-00416/ (Hilary Sykes) Grant Award - \$0.00 (Claim Withdrawn) Paid -Notes: Recommended that the claim be DENIED with leave to refile, pursuant to KRS 49.350, due to claimant's death. The administrator of the estate may revive the claim upon filing a copy of the court order appointing the administrator. CV-2024-00460/ (Hilary Sykes) (Failure to Perfect Claim) Grant Award - \$0.00 Notes: Lost earning along with windows/locks denied with leave to refile. CV-2024-00468/ (Hilary Sykes) on behalf of Grant Award - \$0.00 (Not compensated under KRS 49) Paid -Notes: Denied With Leave to Refile; Unclear whether Offender still resides with the Claimant CV-2024-00511/ (Bissell Roberts) on behalf of Grant Award - \$0.00 (Not compensated under KRS 49) Paid -

Notes: Claimant does not meet the eligibility criteria for receiving compensation benefits pursuant to

KRS 49.280(3) and KRS 49.310(1).

CV-2024-00512/ (Hilary Sykes) on behalf of

Grant Award - \$0.00 (No financial need) Paid -

Notes: Claimant did not incur any expenses related to son's funeral expenses.

CV-2024-00537/ (Hilary Sykes)

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

Notes: Recommended that Lost Earnings be DENIED WITH LEAVE TO REFILE.

CV-2024-00550/ (Hilary Sykes)

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

Notes: Denied with Leave to Refile

on behalf of

CV-2025-00082/ (Hilary Sykes) Grant Award - \$0.00 (Not victim of criminally injurious conduct by Paid statute) Notes: Claimant is not a victimof criminally injurious conduct as defined by KRS 49.280(3) CV-2025-00193/ (Lanola Parsons) Grant Award - \$0.00 (Failure to Perfect Claim) Paid -Notes: Should the Claimant provide the proof requested to support his claim, his request may be revived. CV-2025-00195/ (Lanola Parsons) on behalf of Grant Award - \$0.00 (Funeral/Burial) Paid -Notes: Claimant is DENIED compensation for funeral and burial expenses which she did not incur. CV-2025-00199/ (Lanola Parsons) (Failure to Perfect Claim) Grant Award - \$0.00 Paid -Notes: Should the Claimant provide the proof requested to support her claim, her request may be revived. CV-2025-00213/ (Lanola Parsons) on behalf of Grant Award - \$0.00 (Paid by other sources) Paid -Notes: Already compensated by life insurance contract CV-2025-00214/ (Lanola Parsons) on behalf of Grant Award - \$0.00 (Not compensated under KRS 49 Paid -Notes: Duplicative of CV-2025-00213 CV-2025-00215/ (Lanola Parsons) on behalf of Grant Award - \$0.00 (Not compensated under KRS 49) Paid -Notes: Duplicative of CV-2025-00213 CV-2025-00335/ (Lanola Parsons) on behalf of Grant Award - \$0.00 (Failure to Perfect Claim) Paid -Notes: Should the Claimant provide the proof requested to support her claim, her request may be revived. CV-2025-00336/ (Lanola Parsons) (Failure to Perfect Claim) Paid -Grant Award - \$0.00 Notes: Should the Claimant provide the proof requested to support her claim, her request may be revived.

Sexual Assault Examination Awards

SA-2025-00352/Baptist Health Hardin Hospital on behalf of Grant Award - \$1,819.26 Sexual Assault Exam Fee Paid -Notes: Balance after insurance SA-2025-00382/Baptist Health on behalf of Grant Award - \$1,856.33 Sexual Assault Exam Fee Paid -Notes: Balance after insurance SA-2025-00560/Baptist Health on behalf of Grant Award - \$506.98 Sexual Assault Exam Fee Paid -Notes: Exam, Facility, Labs, Meds SA-2025-00606/Barren River Area Child Advocacy Center on behalf of Grant Award - \$894.00 Sexual Assault Exam Fee Paid -Notes: CAC Fee SA-2025-00607/Barren River Area Child Advocacy Center on behalf of Grant Award - \$894.00 Sexual Assault Exam Fee Paid -Notes: CAC Fee SA-2025-00568/CAC of the Bluegrass on behalf of Grant Award - \$894.00 Sexual Assault Exam Fee Paid -Notes: CAC Fee SA-2025-00617/Cincinnati Children's Hospital Medical Center on behalf of Grant Award - \$450.00 Sexual Assault Exam Fee Paid -Notes: Exam, Facility SA-2025-00553/Compass **Emergency Physicians on** behalf of Grant Award - \$116.04 Triage Paid -Notes: Triage

SA-2025-00612/Compass Emergency Physicians on behalf of Grant Award - \$74.05 Paid -Triage Notes: Triage SA-2025-00619/Hardin County EMS on behalf of Grant Award - \$76.60 **Ambulatory Transportation** Paid -Notes: EMS SA-2025-00577/Kentucky Clinic Pharmacy on behalf of Grant Award - \$230.00 Sexual Assault Exam Fee Paid -Notes: HIV Initial Meds SA-2025-00578/Kentucky Clinic Pharmacy on behalf of Grant Award - \$230.00 Sexual Assault Exam Fee Paid -Notes: HIV Initial Mes SA-2025-00562/Medical Center Bowling Green on behalf of Grant Award - \$218.10 Sexual Assault Exam Fee Paid -Notes: Exam, Facility SA-2025-00587/Medical Center Bowling Green on behalf of Grant Award - \$218.10 Sexual Assault Exam Fee Paid -Notes: Exam, Facility SA-2025-00593/Medical Center EMS, LLC on behalf of Grant Award - \$114.00 **Ambulatory Transportation** Paid -Notes: Ambulatory Transportation SA-2025-00608/Medical Center Bowling Green on behalf of Grant Award - \$511.17 Sexual Assault Exam Fee Paid -

Notes: Exam, Facility, Labs

SA-2025-00621/Medical Center Bowling Green on behalf of

| Grant Award - \$200.00 | Sexual Assault Exam Fee | Paid - |
|---|---------------------------|--------|
| Notes: Exam Fee | | |
| SA-2025-00561/Mercy Regional EMS on behalf of | | |
| Grant Award - \$118.40 | Ambulatory Transportation | Paid - |
| Notes: Ambulatory Transportation | on | |
| SA-2025-00573/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 | | |
| SA-2025-00574/Northern Kentucky CAC on behalf of | | |
| Grant Award - \$894.00 | Sexual Assault Exam Fee | Paid - |
| Notes: CAC Fee | | |
| SA-2025-00597/Norton Audubon Hospital on behalf of | | |
| Grant Award - \$464.69 | Sexual Assault Exam Fee | Paid - |
| Notes: Facility, Meds, Labs, CT | Scan | |
| SA-2025-00605/Owensboro Health Regional Hospital on behalf of | | |
| Grant Award - \$392.65 | Sexual Assault Exam Fee | Paid - |
| Notes: Exam, Facility, Labs | | |
| SA-2025-00551/Pennyrile Children's Advocacy Center on behalf of | | |
| Grant Award - \$894.00 | Sexual Assault Exam Fee | Paid - |
| Notes: CAC Fee | | |
| SA-2025-00576/Pennyrile Children's Advocacy Center on behalf of | | |
| Grant Award - \$894.00 | Sexual Assault Exam Fee | Paid - |
| Notes: CAC Fee | | |

SA-2025-00610/Pennyrile Children's Advocacy Center on behalf of Grant Award - \$894.00 Sexual Assault Exam Fee Paid -Notes: CAC Fee SA-2025-00596/Radiology Associates of Northern Kentucky on behalf of Grant Award - \$525.74 Other Medical Tests or Services Paid -Notes: Radiology Services SA-2025-00264/Saint Joseph Hospital on behalf of Grant Award - \$454.91 Sexual Assault Exam Fee Paid -Notes: Exam, Facility, Labs, Meds SA-2025-00552/Southeastern Emergency Physicians, Inc. on behalf of Grant Award - \$74.05 Triage Paid -Notes: Triage SA-2025-00595/Southeastern Emergency Physicians, Inc. on behalf of Grant Award - \$74.05 Triage Paid -Notes: Triage SA-2025-00611/Southeastern Emergency Physicians, Inc. on behalf of Grant Award - \$74.05 Triage Paid -Notes: Triage SA-2025-00592/St Elizabeth Healthcare on behalf of Grant Award - \$254.95 Sexual Assault Exam Fee Paid -Notes: Exam, Facility, Meds, Labs SA-2025-00613/St Elizabeth Healthcare on behalf of Grant Award - \$635.44 Sexual Assault Exam Fee Paid -

Notes: Exam, Facility, Labs, CT Scan, Meds

Page: 11/15

SA-2025-00620/St Elizabeth Healthcare on behalf of

Grant Award - \$545.73 Sexual Assault Exam Fee Paid -

Notes: Exam, Facility, Labs, Meds

SA-2025-00583/Still Waters Center at Ampersand on behalf

of

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

Notes: Exam

SA-2025-00492/The Medical Center at Albany on behalf of

Grant Award - \$376.79 Sexual Assault Exam Fee

Notes:

SA-2025-00588/ULP

Emergency Medicine on behalf

of

Grant Award - \$74.05 Triage Paid -

Notes: Triage

SA-2025-00589/UofL Health on

behalf of

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

Notes: SANE Fee

SA-2025-00598/UofL Health - U of L Hospital on behalf of

Grant Award - \$263.49 Sexual Assault Exam Fee Paid -

Notes: Exam, Facility, Labs, Meds

SA-2025-00602/UofL Health - U

of L Hospital on behalf of

Grant Award - \$180.30 Sexual Assault Exam Fee Paid -

Notes: Facility, Labs, Meds

SA-2025-00604/UofL Health - U

of L Hospital on behalf of

Grant Award - \$539.19 Sexual Assault Exam Fee Paid -

Notes: Exam, Facility, Labs, Meds

Paid -

SA-2025-00616/UofL Health - U of L Hospital on behalf of

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

Notes: SANE Fee

Sexual Assault Examination Denials

SA-2025-00212/Baptist Health

Paducah on behalf of

Grant Award - \$0.00 Insurance Paid -

Notes: DENY - Insurance Paid

SA-2025-00584/Baptist Health

on behalf of

Grant Award - \$0.00 Insurance Paid -

Notes: DENY - Insurance Paid

SA-2025-00580/Frankfort Regional Medical Center on

behalf of

Grant Award - \$0.00 Insurance Paid -

Notes: Insurance Oaud

SA-2025-00581/Frankfort Regional Medical Center on behalf of

Grant Award - \$0.00 Insurance Paid -

Notes: DENY - Insurance Paid SA-2025-00555/Jennie Stuart

Medical Center on behalf of

Grant Award - \$0.00 Crime did not occur in Kentucky Paid -

Notes: Crime did not occur in Kentucky

SA-2025-00345/Medical Center Bowling Green on behalf of

Grant Award - \$0.00 Insurance Paid -

Notes: DENY - Insurance Paid SA-2025-00351/Medical Center

Franklin on behalf of

Grant Award - \$0.00 Insurance Paid -

Notes: DENY - Insurance Paid

SA-2025-00402/Medical Center Bowling Green on behalf of

| Grant Award - \$0.00 | Insurance | Paid - |
|---|-----------|--------|
| Notes: DENY - Insurance Paid | | |
| SA-2025-00421/Medical Center Bowling Green on behalf of | | B.:1 |
| Grant Award - \$0.00 | Insurance | Paid - |
| Notes: DENY - Insurance Paid | | |
| SA-2025-00130/Owensboro Health Twin Lakes Medical Center on behalf of | | |
| Grant Award - \$0.00 | Insurance | Paid - |
| Notes: Casie is in ongoing dispu | ute. | |
| SA-2025-00435/Owensboro Health Regional Hospital on behalf of | | |
| Grant Award - \$0.00 | Insurance | Paid - |
| Notes: DENY - Insurance Paid | | |
| SA-2025-00496/Pikeville Medical Center on behalf of | | |
| Grant Award - \$0.00 | Insurance | Paid - |
| Notes: DENY - Insurance Paid | | |
| SA-2025-00500/Pikeville Medical Center on behalf of | | |
| Grant Award - \$0.00 | Insurance | Paid - |
| Notes: DENY - Insurance Paid | | |
| SA-2025-00557/Pikeville Medical Center on behalf of | | |
| Grant Award - \$0.00 | Insurance | Paid - |
| Notes: DENY - Insurance Paid | | |
| SA-2025-00558/Pikeville Medical Center on behalf of | | |
| Grant Award - \$0.00 | Insurance | Paid - |
| Notes: DENY - Insurance Paid | | |

SA-2025-00466/Saint Claire Medical Center on behalf of

| Grant Award - \$0.00 | Insurance | Paid - |
|--|-----------|--------|
| Notes: DENY - Insurance Paid | | |
| SA-2025-00420/Saint Joseph Hospital on behalf of | | |
| Grant Award - \$0.00 | Insurance | Paid - |
| Notes: DENY - Insurance Paid | | |
| SA-2025-00488/Saint Joseph Health System on behalf of | | |
| Grant Award - \$0.00 | Insurance | Paid - |
| Notes: DENY - Insurance Paid | | |
| SA-2025-00504/Saint Joseph London on behalf of | | |
| Grant Award - \$0.00 | Insurance | Paid - |
| Notes: DENY - Insurance Paid | | |
| SA-2025-00513/Saint Joseph London on behalf of | | |
| Grant Award - \$0.00 | Insurance | Paid - |
| Notes: DENY - Insurance Paid | | |
| SA-2025-00554/Saint Joseph Mount Sterling on behalf of | | |
| Grant Award - \$0.00 | Insurance | Paid - |
| Notes: DENY - Insurance Paid | | |
| SA-2025-00614/St Elizabeth Healthcare Ft Thomas on behalf of | | |
| Grant Award - \$0.00 | Insurance | Paid - |
| Notes: DENY - Insurance Paid | | |
| SA-2025-00321/Three Rivers Medical Center on behalf of | | |
| Grant Award - \$0.00 | Insurance | Paid - |
| Notes: DENY - Insurance Paid | | |
| | | |