



Crime Victim Compensation Eighth Judicial District

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www.larimer.org/da/vicwit/compensation.htm

MENTAL HEALTH PACKET

Dear Mental Health Professional:

On behalf of the Crime Victim Compensation Board of the Eighth Judicial District, I would like to thank you for your consideration in working with crime victims and our program.

In the following pages and/or documents you will find general information about Crime Victim Compensation as well as specific mental health policies, a Mental Health Provider Application, and the board approved Treatment Plan and Extension Request template. I highly recommend that you save a copy of this packet and documents for future reference as all documents submitted to the Board are required to be typed on the provided templates.

If you have any questions after reviewing this information, please feel free to contact me at 970-498-7290 or by email at crsmith@larimer.org.

Thank you,

Candace Smith
Crime Victim Compensation Administrator
Eighth Judicial District

PROCEDURE

- A. Board reviews claims for eligibility
 - a. Victim is approved for Crime Victim Compensation funds if he/she is the victim of a compensable crime and meets the following statutory requirements:
 - i. the crime occurred after July 1, 1982
 - ii. the crime was reported to law enforcement within 72 hours
 - iii. the application was filed within one year of the date of the crime
 - iv. the victim cooperates fully with law enforcement
 - v. the death or injury to the victim was not substantially attributable to his/her wrongful act or substantial provocation
**the board may waive some of these requirements if good cause is shown or in the interest of justice
- B. Upon claim approval, victim is provided with approval letter for three (3) mental health assessment sessions to establish a treatment plan.
- C. Clinician submits following documents for board review at next regular monthly board meeting:
 - a. Mental Health Provider Application, resume, copy of state license (if not previously approved provider)
 - b. Treatment Plan
- D. Upon Treatment Plan approval, victim and provider are provided approval letter.
- E. Clinician submits itemized billing and EOB (if applicable) to Crime Victim Compensation
- F. If additional mental health treatment is necessary, clinician submits Therapy Extension Request.

FOR DETAILED INFORMATION REGARDING MENTAL HEALTH APPROVAL AND/OR PAYMENT, PLEASE REFER TO FOLLOWING POLICIES

POLICIES

- A. GENERAL GUIDELINES
 - a. **The focus of mental health treatment must be the current victimization. For secondary victims the primary focus must be to understand and cope with the primary victim.**
 - b. As long as the victim's clinician meets the Board's minimum qualifications, the victim may see the clinician of their choice regardless of restrictions placed by the victim's insurance company and/or regardless of the clinician's expertise.
 - c. Inconclusive or unsubstantiated cases may be brought before the Board for consideration on a case-by-case basis but cannot be administratively approved.
 - d. The Board will consider payment of therapy for secondary victims including non-perpetrating siblings, child, or parent. Mental health may be considered for grandparents on a case-by-case basis. A child who witnesses domestic violence may be considered a primary victim on a case-by-case basis.
- B. CLINICIAN QUALIFICATIONS
 - a. All clinicians providing counseling services to crime victims must have a minimum of a Master's Degree in the therapy field and be state licensed; or

- b. be actively pursuing licensure in the mental health field, supervised by a state licensed provider, and be registered with Department of Regulatory Agencies as an unlicensed clinician; or
- c. Clinicians currently enrolled in a therapy field internship, who have a Bachelor's Degree and are working towards a Master's Degree, must be directly supervised by a state licensed provider;
 - i. Crime victims must be provided with information on the process in place to file a complaint against an intern
 - ii. Victims are to be given the contact information for the school the intern is enrolled in
 - iii. It is the responsibility of the intern's licensed supervisor to contact the school in the event of a complaint
 - iv. Disciplinary action will be the responsibility of the counseling facility and the school of enrollment
 - v. It is the responsibility of the intern's licensed supervisor to contact the CVC Administrator and notify him/her of any complaints filed and disciplinary action taken; and
- d. All clinicians providing counseling services to crime victims must submit a resume and Mental Health Provider Application.
- e. The Crime Victim Compensation Board will not consider payment to a mental health provider who has provided victim services to a client in a dual role as part of the mental health provider's professional or volunteer position.

C. ASSESSMENT SESSIONS

- a. Upon administrative or Board approval, a victim is initially awarded three (3) mental health assessment sessions.
- b. Assessment sessions are to be utilized within three (3) months of approval.
- c. Assessment sessions should be held face-to-face and one-on-one to establish a personalized treatment plan.

D. TREATMENT PLAN

- a. Within 30 days of the final assessment session, the mental health provider is required to submit a typed Mental Health Treatment Plan on the Board approved template.
- b. Treatment plan should provide detailed goals and treatment objectives related to the crime and specific to the victim's needs.
- c. No payment beyond three (3) sessions will be paid until a Mental Health Treatment Plan has been submitted and approved.
- d. Treatment Plan requires victim/guardian signature, clinician signature, and supervising clinician signature if applicable.

E. THERAPY AWARDS/PAYMENT

- a. Upon approval of the Mental Health Treatment Plan, the Board can award a primary victim up to 20 mental health sessions to be utilized within one year of the award, and can award a secondary victim up to 10 sessions to be utilized within one year of the award.
- b. Victims and/or mental health providers are required to bill all applicable insurance carriers prior to Crime Victim Compensation. Upon receipt of an explanation of benefit and itemized bill, Crime Victim Compensation will issue payment for the victim's responsibility (co-pay, deductible, etc) up to the maximum award amounts indicated below.
- c. Individual therapy by a master's or PhD level clinician will be paid up to \$100.00/hour.
- d. Individual therapy by a bachelor's level intern will be paid up to \$55.00/hour.
- e. Group therapy will be paid up to \$55.00.
- f. Family therapy will be paid up to \$100.00 per approved mental health provider per session. The mental health provider may not bill and will not receive payment for each member of

the family; however, if each family member has a different mental health provider, each mental health provider may bill and receive payment for their client/victim.

- g. EMDR therapy will be paid up to \$100 per session.
- h. Neurofeedback sessions will be paid at \$100 per session.
- i. Equine Assisted Therapy will be paid up to \$100.00 per session. Provider does not need to submit a separate treatment plan; however, the primary mental health provider (if different) must note in initial Mental Health Treatment Plan if Equine Assisted Therapy is to be utilized.

F. EXTENSION REQUESTS

- a. The mental health provider is required to submit a Therapy Extension Request prior to the expiration of the initial award if it is necessary to continue treatment with the victim.
- b. Only one Therapy Extension Request will be considered by the Board.
- c. The Therapy Extension Request should provide detailed information about the victim's progress as well as information specific to the victim's continuing goals.
- d. No payment will be made for sessions held after the initial termination date until approval of a Therapy Extension Request.
- e. Extension request requires victim/guardian signature, clinician signature, and supervising clinician signature if applicable.

G. CHANGING CLINICIANS

- a. The victim's new clinician must adhere to all policies/procedures as detailed in this section.

H. IN-PATIENT TREATMENT

- a. In-patient treatment may be considered by the Board on a case-by-case basis.
- b. The victim and/or provider must submit copies of intake notes and/or physician reports for Board review.
- c. Upon approval, in-patient claims will be paid under current medical policies.

I. LIMITATIONS

- a. Crime Victim Compensation will not consider payment for the following:
 - i. Individual sessions lasting less than 45 minutes
 - ii. Missed appointments
 - iii. Telephone consultations or contacts, with the case-by-case exception of TeleMental Health
 - iv. Court appearances, travel time, or report writing
 - v. Reports or evaluations requested by law enforcement, DHS, the Court, or DA's Office
 - vi. Psychological testing or evaluation which is not pre-approved by the Board
 - vii. Clarification, reunification, or other sessions involving the perpetrator and/or the perpetrator's clinician which is not pre-approved by the Board
 - viii. Interest
 - ix. Case staffings
 - x. Family therapy sessions without the primary victim
 - xi. Couples and/or marriage counseling
- b. The Board retains the discretion to limit, suspend, or deny payment of bills submitted by a mental health provider who is under review or investigation by a licensing board or law enforcement agency. Should the Board decide to limit, suspend, or deny payment, the following procedure will apply:
 - i. The CVC Administrator shall notify the mental health provider in writing of any change in payment status
 - ii. The CVC Administrator will also notify any claimants receiving services from the mental health provider of any change in payment status

- iii. It is the responsibility of the mental health provider to make arrangements with clients for services provided after the date in which payment status is changed
- iv. It is also the responsibility of the mental health provider to provide the Board with written documentation of the final findings and outcome of licensing review and/or investigation prior to the Board reconsidering reinstatement of payment