

# HOUSE BILL REPORT

## HB 2640

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**As Reported by House Committee On:**  
Public Safety & Emergency Preparedness

**Title:** An act relating to benefits for mental health services under the crime victims' compensation program.

**Brief Description:** Addressing benefits for mental health services under the crime victims' compensation program.

**Sponsors:** Representatives Dickerson, Kagi, Simpson, Kenney, Appleton, Goodman and Ormsby.

**Brief History:**

**Committee Activity:**

Public Safety & Emergency Preparedness: 1/20/10, 1/29/10 [DPS].

**Brief Summary of Substitute Bill**

- Authorizes a victim who has been receiving benefits for mental health services and who has an established relationship with such provider to continue to receive treatment from his or her current mental health provider despite becoming eligible for public assistance.
- Requires the Crime Victims' Compensation Program to become the payer of first resort for mental health services provided to victims.

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### HOUSE COMMITTEE ON PUBLIC SAFETY & EMERGENCY PREPAREDNESS

**Majority Report:** The substitute bill be substituted therefor and the substitute bill do pass. Signed by 5 members: Representatives Hurst, Chair; O'Brien, Vice Chair; Appleton, Goodman and Kirby.

**Minority Report:** Do not pass. Signed by 3 members: Representatives Pearson, Ranking Minority Member; Klippert, Assistant Ranking Minority Member; Ross.

**Staff:** Yvonne Walker (786-7841).

**Background:**

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*This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not a part of the legislation nor does it constitute a statement of legislative intent.*

The Crime Victims' Compensation Program (CVCP) administered by the Department of Labor and Industries provides benefits to innocent victims of criminal acts. Generally, persons injured by a criminal act in Washington, or their surviving spouses and dependents, are eligible to receive benefits (medical treatment and lost wages) under the CVCP provided that:

- the criminal act for which compensation is being sought is punishable as a gross misdemeanor or felony;
- the crime was reported to law enforcement within one year of its occurrence or within one year from the time a report could reasonably have been made; and
- the application for crime victims' benefits is made within two years after the crime was reported to law enforcement or the rights of the beneficiaries or dependents accrued.

In the instance of a victim who has been receiving the CVCP benefits for mental health services in the past now becomes eligible for medical assistance, Medicaid, or some other benefits under the Department of Social and Health Services (DSHS), then that victim is no longer eligible for benefits under the CVCP. The statute requires the CVCP to be the payer of last resort for medical expenses and lost wages. In this example a victim would be required to receive mental health services from a DSHS approved provider. This may require the victim to receive services from a different mental health provider than in the past under the CVCP.

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#### **Summary of Substitute Bill:**

A victim injured by a criminal act who has been receiving benefits for mental health services and who has an established relationship with a mental health provider may continue to receive mental health treatment from his or her current mental health provider. The victim may continue treatment with the same provider despite whether he or she has become eligible for medical assistance or medical care through the DSHS. The mental health provider must be licensed and in good standing.

Initial payment for mental health services must be paid by the CVCP. In the instance of a victim receiving benefits under the DSHS, the DSHS must reimburse the CVCP for any mental health services rendered to the victim.

#### **Substitute Bill Compared to Original Bill:**

All provisions that related to private insurance carriers are deleted. The original bill stated that if a victim has private insurance (such as through an employer) then the insurance carrier must reimburse the CVCP for any mental health services rendered to the victim based upon that carrier's reimbursement rate under the health plan in which the individual is enrolled. Private insurance carriers are no longer addressed in this bill.

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**Appropriation:** None.

**Fiscal Note:** Requested on original bill January 14, 2010. New request ordered on January 29, 2010.

**Effective Date of Substitute Bill:** The bill takes effect 90 days after adjournment of the session in which the bill is passed.

**Staff Summary of Public Testimony:**

(In support) This bill deals with the continuity of care for victims. Being a victim of a violent crime is traumatizing so being able to choose a competent mental health provider and being able to continue in treatment with that provider until one's mental health issues are alleviated is important in helping that victim to recover. Many victims have the inability to trust people due the trauma they have been through. Trust is an important aspect to a victim and once he or she finds a provider that they can rely on it becomes important for continuity of care. In addition, finding a competent provider is also important. Not every mental health provider has been trained in the specialty of trauma. Victims should not be forced to seek care with someone who is not specifically competent in trauma care.

Due to the current economy and budget, it is very unlikely that a victim would be able to continue to receive mental health benefits under a General Assistance for the Unemployable (GAU) benefit. This is a reason victims need to be able to continue their treatment through the CVCP. This bill should not cost any money and is virtually a cost shift. The goal of this bill is to ensure continuity of mental health care among victims participating in treatment.

(With concerns) One of the complexities of the bill was the addition of private insurance and how the CVCP would handle the billing. An amendment should be made to remove the private insurance element and restrict the bill to the GAU medical assistance. This will shrink the fiscal note on the bill.

(Opposed) None.

**Persons Testifying:** (In support) Representative Dickerson, prime sponsor; Laura Brown and Nicole Cole, Fremont Community Therapy Project; Cindy Chen; and Lucy Homans, Washington State Psychological Association.

(With concerns) Dick Dorsett, Department of Labor and Industries.

**Persons Signed In To Testify But Not Testifying:** Lonnie Johns-Brown, Washington Coalition of Sexual Assault Programs.