

Vermont Center for Crime Victim Services 60 South Main Street, Suite 1 Waterbury, VT 05676-1599 www.ccvs.vermont.gov [phone] 802-241-1250 [phone] 800-750-1213

[fax] 802-241-1253 (Victims Compensation only)

[fax] 802-241-4337 (General fax)

Provider Payment Policy

The Victims Compensation Program will only pay for allowable services rendered by a provider who is licensed in the state in which they practice. This is inclusive of dental, mental health, and health care providers. A mental health provider in the state of Vermont must be licensed or registered on the Vermont Roster of Non-Licensed and Non-Certified Psychotherapists. Staff will require proof of credentials from all providers before payment is made.

Payment by the Victims Compensation Program will be considered upon submission of an itemized bill for services rendered and the corresponding explanation of benefits or remittance advice from the insurance company if applicable. The treatment must be directly related to the crime that occurred which resulted in the injury (physical or emotional) or death to the victim. The Program will require documentation to verify that each loss submitted for payment to the Program is crime related.

The Victims Compensation Program is payor of last resort after insurance. If a victim has Medicaid, Medicare, or private health insurance, the insurance carrier must be billed first. Our Program will consider reimbursement for the "patient responsibility" of an insured bill. Per Vermont law the Victims Compensation Program is authorized to pay an uninsured health care facility/provider (which is inclusive of medical and dental providers) at 60% of the billed charge. The provider is prohibited by law from balance billing the victim for the difference. The rate of payment to mental health providers is outlined in the mental health policy.

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Providers who are contracted with insurance companies to accept the insurance company's payment as "payment in full" cannot bill the Compensation Program or the victim for the difference in the amount billed versus the allowable amount that is determined by the insurance company. If an explanation of benefits or remittance advice from an insurance company indicates that there is a "patient responsibility" due, such as a co-payment, co-insurance amount, or an amount applied toward a patient's deductible within our Program caps, our Program will consider payment of that amount.

If a provider is contracted with Medicaid, and they are billing Medicaid for their services, the provider must accept Medicaid's payment as "payment in full". Providers are not allowed to balance bill the patient or any other non-insurance entity for the non-allowable amount as reflected in the Medicaid explanation of benefits or remittance advice.

If the victim has retained a private attorney to represent them in a civil lawsuit or insurance action, all crime related losses must be submitted through the lawsuit or insurance action for payment first. The Victims Compensation Program will only consider payment after receipt of a letter from the victim's attorney agreeing to reimburse our Program in full once a settlement has been reached.

The Victims Compensation Program requires that a provider inform us immediately in writing when charges have been filed against them by the Office of Professional Regulation through the Vermont Secretary of State's Office or the Vermont Medical Board through the Department of Health. The provider must also notify the Program if their license or roster becomes inactive, revoked, or conditioned in the state in which they practice.



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If a provider's license is conditioned, the Victims Compensation Program may suspend payment to the provider for services. A final determination of payment will be made by the Victims Compensation Program's Board of Directors. If a provider's license is inactive or revoked the Victims Compensation Program will not pay the provider for services rendered during the period that their license is inactive, or after a provider's license has been revoked.

If a provider's license has been reinstated or reactivated, the provider must supply the Victims Compensation Program with written supporting documentation proving the reinstatement or reactivation of their license before the Victims Compensation Program can consider payment of any crime related losses submitted by the provider to our Program.

This policy applies to all current and future providers being paid by the Compensation Program for services rendered.