**NOTICE OF PUBLIC MEETING**

**CRIME VICTIM COMPENSATION PROGRAM**

**BOARD MEETING**

**OF THE PINAL COUNTY ATTORNEY’S OFFICE**

**AND AGENDA**

Pursuant to A.R.S. §38-431.02, notice is hereby given to the members of the CRIME VICTIM COMPENSATION PROGRAM BOARD of the Pinal County Attorney’s Office and to the general public that the CRIME VICTIM COMPENSATION PROGRAM BOARD will hold a ***VIRTUAL*** meeting open to the public on **Thursday, July 21, 2022 at 2:00 p.m.** via Google Meet. To join the meeting, please click https://meet.google.com/hbs-vcqy-xdw?hs=122&authuser=0 or call + 1 646-854-9042 with PIN: 669 832 923#‬.

Pursuant to the Americans with Disabilities Act (ADA), the Pinal County Attorney’s Office endeavors to ensure the accessibility of its meetings to all persons with disabilities. Persons with a disability may request a reasonable accommodation, such as a sign language interpreter by contacting the Commission office at (520) 866-6805. Requests should be made as early as possible to allow time to arrange the accommodation.

Agenda for the meeting is as follows:

1. **Call to order and Roll Call**

Crime Victim Compensation Board Members:

Michael Hing

Barbara Kelly

Ninfa West

Gabriel Rodriguez

**II. Approval of the Minutes from the June 16, 2022 Meeting**

**III. Financial Report- June**

|  |  |
| --- | --- |
| ACCOUNT | BALANCE |
| RESTITUTION | $73,225.05 |
| INTEREST | $7,895.40 |
| SUBROGATION | $47,221.55 |
| ACJC ALLOCATION |  $181,636.00 |
| ARPA FUNDS RECEIVED | $15,000.00 |
| Total compensation funds spent & encumbered to date | $187,525.03 |
| **BALANCE OF AJCJ COMPENSATION ALLOCATION** | $9,110.97 |

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| --- |
| **V. Previously Approved/Old Case Consent Agenda:** **PREVIOUSLY APPROVED CASE CONSENT AGENDA** |
|  **Meeting Date: July 21, 2022** |
|  |  |  |
| **Case #**  | **DESCRIPTION OF REQUESTED FUNDING:** | **Payment** | **Approved** | **Moved to Discussion****Agenda** |
| **0127030-2812** | To claimant for out of pocket travel to court on 6/13/22RT 165.24 \* 0.585 = $96.67 | **$96.67**  |  |  |
| **17-2127** | To claimant for out of pocket court travel on 6/21/22RT 134.6\*.585 = $78.74 | **$78.74** |  |  |
|  **0160288-2** | To MH provider, East Valley Family Therapy for 2 service dates: 6/9/22 and 6/23/22  Pay to provider:2 \* 80 = | **$160.00**  |  |  |
| **0160288-1** | To MH provider, East Valley Family Therapy for 2 service dates: 6/9/22 and 6/23/22  Pay to provider:2 \* 80 = | **$160.00** |  |  |
|  | To claimant for travel to 2 MH appointments on 6/9/22 & 6/23/22RT 18.6 \* 0.585 = $10.88 \* 2 =$ 21.76 | **$21.76** |  |  |
| **21-2762** | To MH provider, East Valley Family Therapy for 1 service date: 6/29/22 @ $80.00/visit **Total to Provider**To claimant for MH travel 6/29/22RT: 19.4 \* 0.585= $11.35 **Total to Claimant** | **$80.00****$11.35** |  |  |
| **21-2806** | To claimant for OOP medical expenses to Banner after insurance and adjustments in the amount of $329.38To claimant for OOP medical expenses after insurance and adjustments in the amount of $200.00 **Total to Claimant** | **$329.38****$200.00****$529.38** |  |  |
|   |
| **PINAL COUNTY CRIME VICTIM COMPENSATION PROGRAM BOARD ACTION:****Motion to Approve: Seconded by:** |
|    \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_July 21.2022\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_July 21.2022\_\_ Date  Date  |
|  |
| **Chairman:****\_\_\_\_\_\_Michael Hing\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_7/21/22\_\_\_\_\_\_** Date  |

**VI. Cases scheduled for consideration of award (regular discussion agenda):**

 **OLD BUSINESS (Cases previously considered):**

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| --- | --- |
| **16-1981**  | To claimant for out of pocket work loss, mental health services, and transportation to mental health services: |
|  | Work loss on: 11/30/21, 12/9/21, 1/06/22, 1/13/22, 1/20/22, 2/24/22, 3/8/22, 3/17/22 @ 2 hours each date 52.88\*2= 105.76 \* 8 dates= $846.08 | $ | 846.08 |
|  | Work loss on: 12/16/21, 12/21/21 @ 1 hours each date $52.88\*2 dates = $105.76 | $ | 105.76 |
|  | MH Dates of Service: 11/30/21=$175.00, 12/9/21, 12/16/21, 12/21/21, 1/06/22, 1/13/22, 1/20/22, 2/24/22, 3/8/22, 3/17/22 (all billed at $150.00)Program only pays $110.00 per session.  110.00\*10= 1100.00 | $ | 1,100.00 |
|  | MH DOS for travel: 11/30/21, 12/9/21, 1/6/22, 1/13/22, 1/20/22, 2/24/22, 3/8/22, 3/17/22 = 8 appts RT 29.6 \* 0.585 = 17.32 \* 8 = 138.56 | $ | 138.56 |
|  | **Total to claimant** | $ | **2,190.40** |
|  |  |
| **19-2596** | To Cranberry Psychological Center for MH service date: 6/4/22Billed $175.00 , Program pays $80.00 | $ | **80.00** |
|  |  |
| **0162625-1** | To claimant for out of pocket MH services |
|  | Dates of service: 11/3/21- $155.00 for intake- Program pays $80.00. 11/19/21,11/27/21, 12/3/21, 12/10/21, 12/15/21 6 \* $80.00 | $ | **480.00** |
|  |  |
| **21-2776** | Pay to medical providers for services not otherwise paid: |
|  | BME Services for Premier Emergency Medical Specialists after insurance and adjustments for date of service: 2/12/21 | $ | **383.00** |
|  |  |
| **0168020-1** | To medical providers for services not otherwise paid/adjusted: original request $3,721.00, negative adjustment $1,339.56 to equal- $2,381.44 |
|  | Chandler Radiology Associates LLC for service date 5/6/22 | $ | **2,381.44** |
|  |  |
| **0162906-1** | To claimant for out of pocket medical costs and medical prescription costs not otherwise paid/adjusted: |
|  |  Medical bills for service date 3/1/2020  | $ | 131.14 |
|  |  Medical prescriptions for service date 3/2/2020 | $ |  13.56 |
|  | **Total to claimant** | **$** | **144.70** |

**VII. NEW BUSINESS:**

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| **0166256** | To Board for determination of general eligibility for compensable crime-related expenses not covered by a collateral source and for payment to Medical Providers not covered by a collateral source and mileage reimbursement to claimant for court travel. **To Banner Health for service date 2/13/22- $300.00** **To Emergency Professional Services for service date 2/13/22- $316.05** **To Claimant for court travel on 6/9/22- $26.21** |
|  |  |
| **0169299** | To Board for determination of general eligibility for compensable crime-related expenses not covered by a collateral source. |
|  |  |
| **0166657** | To Board for determination of general eligibility for compensable crime-related expenses not covered by a collateral source. |
|  |  |
| **0169612-1 &2** | To Board for determination of general eligibility for compensable crime-related expenses not covered by a collateral source. |
|  |  |
| **0167553** | To Board for determination of general eligibility for compensable crime-related expenses not covered by a collateral source. |
|  |  |
| **0168464-1, 2 & 3****(out of 5)** | To Board for determination of general eligibility for compensable crime-related expenses not covered by a collateral source and for payment to claimant for out of pocket funeral and city cemetery fees expenses for victim 0168464-1 **Funeral Expenses - $4,900.90** **City Cemetery Fees - $412.00** **Total to claimant: $5,312.90** |
|  |  |
| **0168464-4 & 5****(out of 5)** | To Board for determination of general eligibility for compensable crime-related expenses not covered by a collateral source and for payment to claimant for out of pocket funeral cost for victim 0168464-1. **Funeral Expenses to claimant: $1,632.54** |
|  |  |
| **0167811** | To Board for determination of general eligibility for compensable crime-related expenses not covered by a collateral source. |
|  |  |
| **0167107** | To Board for determination of general eligibility for compensable crime-related expenses not covered by a collateral source. |
|  |  |
| **0169619-1 & 2** | To Board for determination of general eligibility for compensable crime-related expenses not covered by a collateral source. |
|  |  |
| **0169631-1 & 2** | To Board for determination of general eligibility for compensable crime-related expenses not covered by a collateral source and payment to provider for funeral expenses for victim 0169631-1: **Bulman Family Funeral Homes, INC: $6,835.04** |
|  |  |
| **0163097-1 & 2** | To Board for determination of general eligibility for compensable crime-related expenses not covered by a collateral source. |
|  |  |
| **0168977** | To Board for determination of general eligibility for compensable crime-related expenses not covered by a collateral source; also payment to provider Banner Health for medical expenses not covered by a collateral source and adjustments made AND to claimant for OOP medical cost paid: **To Banner Health: $845.00** **To Claimant: $50.00** |
|  |  |
| **0169809-1&2** | To Board for determination of general eligibility for compensable crime-related expenses not covered by a collateral source. |
|  |  |
| **0169841** | To Board for determination of general eligibility for compensable crime-related expenses not covered by a collateral source. |
|  |  |
| **0169211-1 & 2** | To Board for determination of general eligibility for compensable crime-related expenses not covered by a collateral source. |
|  |  |
| **0169214-1 & 2** | To Board for determination of general eligibility for compensable crime-related expenses not covered by a collateral source. |

**VIII. Call to the Public**

 Those wishing to address the Compensation Board need not request permission in advance. Action

 taken as a result of public comment will be limited to directing Board members to study the matter or

 rescheduling the matter for further consideration and decision at a later date.

 **IX. Date-Time-Location of Next Meeting**

 The next proposed Crime Victim Compensation Program Board meeting is tentatively scheduled for

 **Thursday, August 18, 2022 at 2:00 p.m.** via Google Meet.

 **X. Other Business**

* Volunteer Time Sheet( how many days)

 **XI. Adjournment**

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ motions to adjourn to meeting; seconded by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ .

The Crime Victim Compensation Program Board Meeting of the Pinal County Attorney’s Office was adjourned at \_\_\_\_\_\_.

 A copy of the agenda background material provided to Compensation Board members is available for

 public inspection at the Pinal County Attorney’s Office, 45 N. Pinal Street, Florence, AZ, 85132

 (520) 866-6805. This document is available in alternative formats by contacting the Pinal County

 Attorney’s Office.