

**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 **Friday, May 19, 2023 at 2:00 p.m.** via Google Meet. To join the meeting, please click Video call link:

<https://meet.google.com/jrd-xwpr-igx?hs=122&authuser=0>

(US)[+1 513-788-2153](tel:+15137882153)

PIN: 562 543 502#

If you need assistance in accessing the meeting, please contact our office at 520-866-6805. One or more members of the Board may participate in this meeting by telephonic conference call. The Board may go into executive session, which will not be open to the public, to discuss certain matters on any of the following agenda items pursuant to A.R.S. 38-431.03(A) (2).

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:

**I. 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 March 16, 2023 Meeting**

**III. Financial Report- April 2023**

ACCOUNT	BALANCE
RESTITUTION	\$86,159.69
INTEREST	\$9,661.42
SUBROGATION	\$47,221.55
ACJC ALLOCATION (\$179,810.00-\$55,000.00 admin expenses + \$8,000.00 award)	\$132,810.00
ARPA FUNDS RECEIVED (\$46,000.00 + \$42,000.00 in April)	\$88,000.00
Total compensation funds spent & encumbered to date	\$166,314.83
<b>BALANCE OF AJCJ COMPENSATION ALLOCATION</b>	<b>\$54,495.17</b>

IV. Previously Approved/Old Case Consent Agenda:

## PREVIOUSLY APPROVED CASE CONSENT AGENDA

Meeting Date: May 19, 2023

Case #	DESCRIPTION OF REQUESTED FUNDING:	Payment	Approved	Moved to Discussion Agenda
0141402-5	<p>To MH provider, Centre for Well Being, for service dates 4/12/23 &amp; 1/24/23 Billed at \$170.00, PPO discount \$43.63, Provider adjustment \$16.37 equals \$110.00 * 2 = <b>\$220.00</b></p> <p>To MH provider, Centre for Well Being, for service date 12/7/22 Billed at \$170.00, PPO discount \$65.89, equals <b>\$104.11</b> (provider billed at \$110.00, however patient responsibility is less; therefore the program pays \$104.11)</p> <p>To MH provider Centre for Well Being, for service date 5/2/23 Billed at \$125.00 for 30 minute, PPO discount is \$60.05, equals patient responsibility of \$64.95. The program pays \$110 per one hour session. \$110/2 = <b>\$55.00</b></p> <p style="text-align: right;"><b>Total to Provider</b></p>	\$379.11		
	<p>To claimant for mileage to mental health appointments 12/7/22, 1/24/23, 4/12/23, &amp; 5/2/23 RT 94 miles * 0.655 = \$61.57 * 4 = \$246.28</p> <p style="text-align: right;"><b>Total to Claimant</b></p>	\$246.28		
0170112-1	<p>To claimant for mileage to court on 5/1/23 RT 40 miles * 0.655 = \$26.20</p> <p style="text-align: right;"><b>Total to Claimant</b></p>	\$26.20		
0172030-4	<p>To provider, EMDR Transformations Counseling, for dates of service: 3/23/23 Billing is for \$150.00 per joint session with 0172030-4 and 0172030-6 \$150.00/2= <b>\$75.00</b></p> <p>To provider, EMDR Transformations Counseling, for dates of service: 3/6/23, 4/6/23, and 4/18/23 Billing is for \$110.00 for each individual session, \$110.00 * 3 = <b>\$330.00</b></p> <p style="text-align: right;"><b>Total to Provider</b></p>	\$405.00		
	<p>To claimant for travel to counseling dates of service: 3/6/23, 4/6/23, &amp; 4/18/23: RT 30 miles * 0.655 = \$19.65 * 3 = \$58.95</p> <p style="text-align: right;"><b>Total to Claimant</b></p>	\$58.95		
0172030-6	<p>To provider, EMDR Transformations Counseling, for dates of service: 3/23/23 Billing is for \$150.00 per joint session with 0172030-4 and 0172030-6 \$150.00/2= <b>\$75.00</b></p> <p>To provider, EMDR Transformation Counseling, for dates of service: 3/2/23 and 4/11/23</p>			

	Billing is for \$110.00 for each individual session, $\$110.00 * 2 = \$220.00$  <b>Total to Provider</b> <b>\$295.00</b>			
	To claimant for travel to counseling for dates of service: 3/2/23, 3/23/23, & 4/11/23; RT 30 miles * 0.655 = $\$19.65 * 3 = \$58.95$ <b>Total to Claimant</b> <b>\$58.95</b>			
<b>0163985-4</b>	To provider, Northern Lights Therapy for MH service dates: 4/6/23 @ \$110.00  <b>Total to Provider</b> <b>\$110.00</b>			
	To claimant for OOP travel to MH service dates: 4/6/23 RT 6 miles @ 0.655 = \$3.93 <b>Total to Claimant</b> <b>\$3.93</b>			
<b>19-2567</b>	To claimant for travel expenses to court on 3/14/23 & 4/24/23 RT 78.4 miles * 0.655 = $\$51.35 * 2 = \$102.70$ <b>Total to Claimant</b> <b>\$102.70</b>			
<b>19-2569</b>	To claimant for travel expenses to court on 3/14/23 & 4/24/23 RT 66 miles * 0.655 = $\$43.23 * 2 = \$86.46$ <b>Total to Claimant</b> <b>\$86.46</b>			
<b>19-2570</b>	To claimant for travel expenses to court on 3/14/23 & 4/24/23 RT 60 miles * 0.655 = $\$39.30 * 2 = \$78.60$ <b>Total to Claimant</b> <b>\$78.60</b>			
<b>17-2127</b>	To claimant for travel expenses to court on 5/4/23 RT 134.6 miles * 0.655 = \$88.16 <b>Total to Claimant</b> <b>\$88.16</b>			
<b>0130725-2</b>	To claimant for travel expenses to court on 5/8/23 RT 66 miles * 0.655 = \$43.23 <b>Total to Claimant</b> <b>\$43.23</b>			
<b>0169510-1</b>	To mental health provider, Beckstein Behavioral Health, for service dates: 3/20/23, 4/3/23, 4/10/23, 4/17/23, & 4/24/23 Billed at \$175.00 each, program pays \$110.00 each * 5 = \$550.00 <b>Total to Provider</b> <b>\$550.00</b>			
	To claimant for travel to mental health service dates 3/20/23, 4/3/23, 4/10/23, 4/17/23 & 4/24/23 RT 70.6 miles * 0.655 = $\$46.24 * 5 = \$231.20$ <b>Total to Claimant</b> <b>\$231.20</b>			

**PINAL COUNTY CRIME VICTIM COMPENSATION PROGRAM BOARD ACTION:**

**Motion to Approve:**

**Seconded by:**

\_\_\_\_\_ May 19, 2023  
Date

\_\_\_\_\_ May 19, 2023  
Date

**Chairman:**

Michael Hing 5/19/23  
Date

**V. Cases scheduled for consideration of award (regular discussion agenda):  
OLD BUSINESS (Cases previously considered):**

**0168790-1** To claimant for work loss  
Hourly wage is \$22.84/hour at 40 hours per week = \$913.60. Program maximum per week is \$554.00. There was no collateral source, such as paid time off, sick leave, short term disability, or long term disability.  
Weeks: 12/26/21-1/1/22, 1/2/22-1/8/22, 1/9/22-1/15/22, 1/16/22-1/22/22, 1/23/22-1/29/22, 1/30/22-2/5/22, 2/6/22-2/12/22, 2/13/22-2/19/22, 2/20/22-2/26/22, & 2/27/22-3/5/22  
554.00 per week \* 10 weeks = **\$5,540.00**

Weeks: 3/6/22-3/12/22 & 3/13/22-3/19/22  
Hourly wage is \$22.84/hour at 17.5 hours per week = \$399.70  
399.70 \* 2 weeks = **\$799.40**

Weeks: 3/20/22-3/26/22 & 3/27/22-4/2/22  
Hourly wage is \$22.84/hour at 10 hours per week = \$228.40  
228.40 \* 2 weeks = **\$456.80**

**Total to Claimant \$ 6,796.20**

**0166094-1** To claimant for work loss  
Worker's compensation paid at 66 2/3% based on average monthly wage of \$4075.74. This makes the hourly wage \$25.47/hour based on 160 hours per month (40 hours per week, 4 weeks per month). The program can make up the 33 1/3% difference up to the \$554.00 per week maximum.

Dates: 9/1/21-9/2/21  
Hourly wage \$25.47 \* 16 hours = \$407.52 less \$180.30 (worker's comp) = **\$227.22**

Weeks 9/3/21-12/1/21 (12 weeks total)  
Hourly wage \$25.47 \* 40 hours = \$1,018.80 less \$670.03 (worker's comp) = \$348.77/week  
\* 12 weeks = **\$4,185.24**

Weeks 12/2/21-12/31/21 (4 weeks total, worker's comp paid out for 80.75 hours during this four week period).  
Hourly wage \$25.47 \* 20.2 hours = \$514.49 less \$342.25 (worker's comp) = \$172.24 \* 4 = **\$456.80**

**Total work loss \$5,101.42**

To claimant for travel to court dates: 3/2/23, 3/27/23, & 4/24/23  
RT 26 miles \* 0.655 = \$17.03 \* 3 = **\$51.09**

**Total to Claimant \$ 5,152.51**

**0166900-1** To claimant for out of pocket medical expenses for date of service 4/27/22  
Billed at \$526.00, less insurance payment and adjustment \$426.00, equals patient Responsibility of \$100.00

**Total to Claimant \$ 100.00**

**0170487-1** To provider, Exceptional Healthcare Maricopa, for date of service 5/31/22 for facility charges  
 Billed at \$6,152.08, insurance allowed amount \$1,082.02, less adjustment by provider \$5,070.06, less payment from insurance \$757.41, equals patient responsibility \$324.61

**Total to Provider \$ 324.61**

**0170956-1** To provider, Emergency Professional Services, for emergency services on 8/15/22  
 Billed at \$1,227.00, less insurance payment/adjustments \$735.07 = \$491.93

**Total to Provider \$ 491.93**

**VII. NEW BUSINESS:**

**0164284-1** To Board for determination of general eligibility for compensable crime-related expenses not covered by a collateral source.

**0177138-1, -2, & -3 (1 of 2)** To Board for determination of general eligibility for compensable crime-related expenses not covered by a collateral source.

**0177138-4, -5, -6 & -7 (2 or 2)** To Board for determination of general eligibility for compensable crime-related expenses not covered by a collateral source.  
 To claimant (-4) for out of pocket funeral expense for death certificate for \$35.50  
**To claimant for \$35.50**

**0176636-2, -3, & -4** To Board for determination of general eligibility for compensable crime-related expenses not covered by a collateral source.

**0174202-1** To Board for determination of general eligibility for compensable crime-related expenses not covered by a collateral source.

**0173958-1 & -2** To Board for determination of general eligibility for compensable crime-related expenses not covered by a collateral source.

**0173232-1** To Board for determination of general eligibility for compensable crime-related expenses not covered by a collateral source.

To claimant for work loss  
 Dates: 10/13 and 10/14/22  
 Hourly rate is \$35.00/hour \* 16 hours = \$560.00, program pays maximum **\$554.00** per week

Weeks: 10/17/22-1/27/23 (15 weeks)  
 Hourly rate is \$35.00/hour \* 40 hours = \$1400.00, program pays maximum \$554.00 per week  
 \$554.00 \* 15 = **\$8,310.00**

**Total to Claimant: \$8,864.00**

<b>0163325-1 (1 of 5)</b>	To Board for determination of general eligibility for compensable crime-related expenses not covered by a collateral source.
<b>0163325-2 (2 of 5)</b>	To Board for determination of general eligibility for compensable crime-related expenses not covered by a collateral source.
<b>0163325-3 (3 of 5)</b>	To Board for determination of general eligibility for compensable crime-related expenses not covered by a collateral source.
<b>0163325-4 (4 of 5)</b>	To Board for determination of general eligibility for compensable crime-related expenses not covered by a collateral source.
<b>0163325-5, -6, -7, &amp; -8 (5 of 5)</b>	To Board for determination of general eligibility for compensable crime-related expenses not covered by a collateral source.
<b>0177327-1</b>	To Board for determination of general eligibility for compensable crime-related expenses not covered by a collateral source.
<b>0177430-1, -2, &amp; -3 (1 of 2)</b>	To Board for determination of general eligibility for compensable crime-related expenses not covered by a collateral source.
<b>0177430-4 &amp; - 5 (2 of 2)</b>	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, June 15, 2023, at 2:00 pm** 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.