

Detailed Overview of Forensic States - Part I

3/1/2011

State	Doctor or SANE Fee for the Forensic Exam	Facilities Fee	ER Doctor Triage Fee	Ambulance Fee	Colposcopy and/or Anoscopy	Pregnancy Test	STD Testing	Hepatitis Testing	HIV Testing	Pregnancy Prophylaxis	STD Prophylaxis	Hepatitis Prophylaxis	HIV Prophylaxis	Alcohol Testing	Drug Testing	Repair of Minor Wounds Associated with S/A
Alabama	SANE - \$175; Physician - No Set Fee	\$150	Yes - for children only and only if medically necessary.	No	Yes - \$50	Yes - \$10	Yes - No Set Fee	Yes - No Set Fee	Yes - No Set Fee	Yes - Orval tabs/each - \$4.50 or Zovia tabs/each - \$4.40	Yes - Azithromycin (Zithromax) 1 gram/each - \$39.50; Ciprofloxacin 500 mg./each -\$12; Doxycycline 100mg/each - \$1; Metronidazole (Flagyl) 500 mg/each - \$5.50; Ofloxacin - \$12	Yes - Recombivax 10 mcg/each - \$40	Yes - No Set Fee	Yes - \$95 – but the ACVCC will <u>only</u> consider payment of the bill if law enforcement requests GHB screening and a sample is sent to DFS or other labs.	Yes - \$95 – but the ACVCC will <u>only</u> consider payment of the bill if law enforcement requests GHB screening and a sample is sent to DFS or other labs.	No
Arkansas	Yes - \$350	Yes - \$350	Yes - \$350 Fee would be split between the ER Doctor and the SANE	Yes - \$350	Yes - \$160	Yes - included in the \$200 Lab Fee	Yes - included in the \$200 Lab Fee	Yes - included in the \$200 Lab Fee	Yes - included in the \$200 Lab Fee	Yes - included in the \$350 Facilities Fee	Yes - included in the \$350 Facilities Fee	Yes - included in the \$350 Facilities Fee	Yes - either 3 day or 28 day, whichever is prescribed - included in the \$350 Facilities Fee	Yes - included in the \$200 Lab Fee	Yes - included in the \$200 Lab Fee	No
*Delaware - *Info from website <u>ONLY</u> this State failed to respond to requests for additional information	Yes	Yes	?	?	Yes	Yes	Yes	Yes	?	?	Yes	Yes	?	?	?	No

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Florida	Yes	Yes	No	No	Yes	Yes	Yes	No	No	Yes	Yes	No	No	Yes - if Victim's symptoms suggest that the sexual assault may have been drug facilitated.	Yes - if Victim's symptoms suggest that the sexual assault may have been drug facilitated.	No
Idaho	Yes	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes	Yes - if the prescription is given at the time of the initial exam. The prescription must be filled by the Medical Facility where the initial exam was performed. The cost <u>will not</u> be covered under the Sexual Assault Examination Program if the meds are prescribed at a later date and/or the Victim fills the prescription herself.	Yes - if the prescription is given at the time of the initial exam. The prescription must be filled by the Medical Facility where the initial exam was performed. The cost <u>will not</u> be covered under the Sexual Assault Examination Program if the meds are prescribed at a later date and/or the Victim fills the prescription himself/herself.	Yes - if the prescription is given at the time of the initial exam. The prescription must be filled by the Medical Facility where the initial exam was performed. The cost <u>will not</u> be covered under the Sexual Assault Examination Program if the meds are prescribed at a later date and/or the Victim fills the prescription himself/herself.	Yes - either 3 day or 28 days if the prescription is given at the time of the initial exam. The prescription must be filled by the Medical Facility where the initial exam was performed. The cost <u>will not</u> be covered under the Sexual Assault Examination Program if the meds are prescribed at a later date and/or the Victim fills the prescription himself/herself.	Yes	Yes	No

CERTAIN CONDITIONS ONLY

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Indiana	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	Yes	Yes	Yes
Iowa	Yes - \$200	Yes - \$300	No - only the individual who actually performs the sexual assault exam will be paid.	No	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes - 3 day or 28 day, whichever is prescribed	Yes	Yes	No
Kentucky	Yes - \$200	Yes - \$250	No	No	Yes - included in the \$200 Doctor or SANE Fee	Yes - included in the \$100 Lab Fee	No	No	No	Yes - included in the \$100 Pharmacy Fee	No	No	No	Yes - included in the \$100 Lab Fee	Yes - included in the \$100 Lab Fee	Yes - included in the \$250 Facility Fee

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Maine	Yes	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes	Yes - <u>however</u> , all prescriptions must be given at the time of the initial testing and treatment and filled by the Hospital. The cost will not be covered if the Victim fills the prescription herself.	Yes - <u>however</u> , all prescriptions must be given at the time of the initial testing and treatment and filled by the Hospital. The cost will not be covered if the Victim fills the prescription himself/herself.	Yes - <u>however</u> , all prescriptions must be given at the time of the initial testing and treatment and filled by the Hospital. The cost will not be covered if the Victim fills the prescription himself/herself.	Yes - either 3 day or 28 days if prescription is given at the time of the initial testing and treatment. The prescription must be filled by the Hospital. The cost will <u>not</u> be covered if the Victim fills the prescription himself/herself.	Yes	Yes	Yes
Massachusetts	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes - 3 day or 28 day, whichever is prescribed	Yes - if Victim's symptoms suggest that the sexual assault may have been drug facilitated.	Yes - if Victim's symptoms suggest that the sexual assault may have been drug facilitated.	Yes
Michigan	Yes - included in the \$400 Examination Fee	Yes - included in the \$400 Examination Fee	Yes - included in the \$400 Examination Fee	No	Yes - included in the \$400 Examination Fee	Yes - included in the \$125 Lab Fee	Yes - included in the \$125 Lab Fee	Yes - included in the \$125 Lab Fee	Yes - included in the \$125 Lab Fee	Yes - included in the \$75 Pharmaceuticals Fee	Yes - included in the \$75 Pharmaceuticals Fee	Yes - included in the \$75 Pharmaceuticals Fee	Yes - 3 day - included in the \$75 Pharmaceuticals Fee	Yes - included in the \$125 Lab Fee	Yes - included in the \$125 Lab Fee	No

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Mississippi	Yes - included in the \$350 Physician, NP, or SANE fee	Yes - \$450	Yes - included in the \$350 Physician, NP, or SANE fee	No	Yes - included in the \$350 Physician, NP, or SANE fee	Yes - included in the \$200 Lab Tests Fee	Yes - if medically necessary - included in the \$200 Lab Tests Fee	Yes - if medically necessary - included in the \$200 Lab Tests Fee	Yes - if medically necessary - included in the \$200 Lab Tests Fee	Yes - included in the \$450 Facilities Fee	Yes - included in the \$450 Facilities Fee	Yes - included in the \$450 Facilities Fee	Yes - 3 day supply - included in the \$450 Facilities Fee	Yes - included in the \$200 Lab Tests Fee	Yes - included in the \$200 Lab Tests Fee	No
Missouri	Yes	Yes	No	No	Yes	No - 14 yrs. old and up Yes - 13 yrs. old and under	No - 14 yrs. old and up Yes - 13 yrs. old and under	No - 14 yrs. old and up Yes - 13 yrs. old and under	No - 14 yrs. old and up Yes - 13 yrs. old and under	No	No	No	No	Yes - if exam checklist indicates that the incident was drug facilitated.	Yes - if exam checklist indicates that the incident was drug facilitated.	No
New Hampshire	Yes - included in the \$800 Forensic Medical Exam Fee	Yes - included in the \$800 Forensic Medical Exam Fee	Yes - included in the \$800 Forensic Medical Exam Fee	Yes - included in the \$800 Forensic Medical Exam Fee	Yes - included in the \$800 Forensic Medical Exam Fee	Yes - included in the \$800 Forensic Medical Exam Fee	Yes - included in the \$800 Forensic Medical Exam Fee	Yes - included in the \$800 Forensic Medical Exam Fee	Yes - included in the \$800 Forensic Medical Exam Fee	Yes - included in the \$800 Forensic Medical Exam Fee	Yes - included in the \$800 Forensic Medical Exam Fee	Yes - included in the \$800 Forensic Medical Exam Fee	Yes - 28 day course is included in the \$800 Forensic Medical Exam Fee	Yes - included in the \$800 Forensic Medical Exam Fee	Yes - included in the \$800 Forensic Medical Exam Fee	Yes - included in the \$800 Forensic Medical Exam Fee

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New York	Yes	Yes	Yes - if billed by Hospital along with other services provided during initial exam. Payment is made to the Hospital and the Hospital pays individual service providers (if any).	No	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes - 3 day	Yes	Yes	No
North Carolina	Yes - \$350	Yes - \$250	Yes - Included in the \$350 Physician or SANE Nurse Fee	No	No	Yes - Included in the \$200 Other Expenses Fee	No	No	No	Yes - Included in the \$200 Other Expenses Fee	No	No	No	No	No	No
Ohio	Yes	Yes	No	No	Yes	No	No	No	No	No	Yes	No	No	No	No	No

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Oklahoma	Yes - included in the \$450 Sexual Examination Fee	Yes - included in the \$450 Sexual Examination Fee	No	No	Yes - included in the \$450 Sexual Examination Fee	No	No	No	No	Yes - included in the \$50 Medications Fee	Yes - included in the \$50 Medications Fee	No	No	No	No	No
Oregon	Yes. \$380 - "Complete" Medical Assessment or \$455 if "Complete" Medical Assessment is performed by SANE. \$175 - "Partial" Medical Assessment or \$250 if "Partial" Medical Assessment is performed by SANE.	Yes - Included in the "Complete" or "Partial" Medical Assessment Fee	No	No	Yes - but <u>only</u> when performed in <u>child medical assessments</u> conducted at one of Oregon's 20 Child Assessment Centers	Yes - included in the \$55 Pregnancy Prophylaxis Fee	No	No	No	Yes - \$55	Yes - included in the \$100 STD Prophylaxis Fee	Yes - included in the \$100 STD Prophylaxis Fee	Yes - included in the \$100 STD Prophylaxis Fee	No	No	No

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Pennsylvania	Yes	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes	Yes - <u>if</u> the prescription is given at the time of the initial exam.	Yes - <u>if</u> the prescription is given at the time of the initial exam.	Yes - <u>if</u> the prescription is given at the time of the initial exam.	Yes - either 3 day or 28 days <u>if</u> the prescription is given at the time of the initial exam.	Yes	Yes	No
Rhode Island	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
South Carolina	Yes	Yes	Yes	No	Yes - Colposcopy; No - Anoscopy	Yes	Yes	Yes	Yes	Yes	Yes, <u>except for syphilis</u>	Yes	Yes - 3 day supply	No	No	No
Tennessee	Yes	Yes	Yes, <u>if</u> the exam takes place at the same location	No	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes - 3 day supply	Yes	Yes	No

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Texas	Yes - \$195	Yes - \$250	No	No	<p><u>Yes/Colposcopy</u> - \$233 (includes \$195 Doctor or SANE Fee for Forensic Exam). Associated office visit for colposcopy (non-medical facility) - \$26.</p> <p><u>Yes - Anoscopy</u> - \$71</p>	Yes - \$6 (included in \$150 Laboratory Procedures Fee)	<p>Yes - (included in the \$150 Laboratory Procedures Fee).</p> <p><u>Specific Fees Include:</u></p> <p>\$37 - Chlamydia Culture; \$16 - Gonorrhea Testing; \$11 - Syphilis Test;</p>	Yes - (included in the \$150 Laboratory Procedures Fee)	Yes - (included in the \$150 Laboratory Procedures Fee)	No	No	No	No	Yes - \$44 (included in \$150 Laboratory Procedures Fee)	Yes - \$44 (included in \$150 Laboratory Procedures Fee)	No
Utah	Yes - \$300 w/o photo documentation; and up to \$600 with photo documentation	Yes - \$350	Yes	No	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes - 3 day or 28 day, whichever is prescribed	No	No	No

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Vermont	Yes	Yes	Yes	Yes	Yes - <u>if</u> medically necessary.	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes - *either 3 day or 28 days (or longer in certain instances). *Medical practioners are encouraged to start with a 3-5 day supply first to see if the Victim can tolerate the medication, with a prescription for an outside pharmacy provided to the Victim for the balance.	Yes, if medically necessary. <u>No</u> , if not medically necessary.	Yes, if medically necessary. <u>No</u> , if not medically necessary.	Yes
Virginia	Yes	Yes	Yes	Yes - <u>but</u> only in situations where a Victim must be transferred to a facility that is better able to provide a forensic examination.	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes - 3 day <u>if</u> the charge is included with the bill for the initial exam.	Yes - an explanation is required to ensure it is for forensic purposes only	Yes - an explanation is required to ensure it is for forensic purposes only	No

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Washington	Yes	Yes	Yes	No	Yes, included in the Professional Fees.	Yes	Yes	Yes	Yes	Yes	Yes	Yes	3 day supply	Yes	Yes	Yes
Wisconsin	Yes	Yes	Yes	Yes, if medically necessary. No, if not medically necessary.	Yes	Yes	Yes	Yes	Yes	No	Yes	Yes	Yes - 3 day or 28 day, whichever is prescribed	Yes	Yes	Yes

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State	Follow-up Treatment	Description of Follow-up Treatment	Counseling Services	Description of Counseling Services	Flat Fee, Fee Schedule or Other	Reimbursable Services Included in the <u>MAXIMUM</u> Flat Fee Reimbursement Amount, Fee Schedule Reimbursement Amount or Other Payment Reimbursement Amount	Is VOCA Money used to pay for FME?	Bill Insurance First?
Alabama	No	N/A	No	N/A	Fee Schedule	<p>SANE Fee: \$175; Facilities Fee: \$150; *Medication Fees: Azithromycin (Zithromax) 1 gram/each - \$39.50; Ciprofloxacin 500 mg./each - \$12; Doxycycline 100mg/each - \$1; Metronidazole (Flagyl) 500 mg/each - \$5.50; Ofloxacin - \$12; Orval tabs/each - \$4.50; Promethazine (Phenergan) 12.5 mg/each - \$2.50; Recombivax 10 mcg/each - \$40; Zovia tabs/each - \$4.40;</p> <p>Procedure Fees: Colposcope Exam - \$50; UV Light Screening - \$20; Pregnancy Test - \$10; Venipuncture - \$10; Microscopic Sperm Screening - \$32; **Suspected Drug Facilitated Screening - \$95.</p> <p>*If a medication that is not included is utilized, a description is required so ACVCC can consider payment of the medication. **If law requests GHB screening and a sample is sent to DFS or other labs, ACVCC can consider payment of the bill.</p>	Yes	Yes
Arkansas	No	N/A	No	N/A	Fee Schedule	<p>Facility Fee: \$350; Physician or SANE: \$350; Ambulance: \$350; Lab Fees: \$200; Colposcopy: \$160</p>	No	<p>Yes - if Victim has a federally financed benefits program such as Medicaid, Medicare, Champus or V.A. No - if Victim is uninsured or has private medical insurance.</p>
*Delaware - *Info from website <u>ONLY</u> - this State failed to respond to requests for additional information	Yes	1 return follow-up visit.	No	N/A	Flat Fee	<p>\$950 - Includes Physician's fees for the collection of patient history, physical, collection of specimens and treatment for the prevention of STDs, including 1 return follow-up visit; Emergency dept expenses, including emergency room fees and cost of pelvic tray; Lab expenses for wet mount for sperm, swabs for acid phosphates and ABH antigen; blood typing, serology for syphilis and Hepatitis B; cultures for gonorrhea, chlamydia, trichomonas and other sexually transmitted diseases; pregnancy testing; urinalysis; and any other lab test needed to collect evidence that could be used in the prosecution. DE ST TI 11 § 9023</p>	Yes	Yes
Florida	No	N/A	No	N/A	Flat Fee	<p>\$500 - Examiner's fee; ER room; Pregnancy Test; STD Tests (excluding Hepatitis & HIV); Pregnancy Prophylaxis; and STD Prophylaxis (excluding Hepatitis & HIV).</p>	Yes	No

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Idaho	No	N/A	No	N/A	Fee Schedule	Fee Schedule is based on national and northwest medical cost data to provide a specific service (Relative Value Unit – RVU), and then multiplied by a Conversion Factor, set by the State's Workers Compensation system. Hospitals are paid at a percentage based on the size of the hospital: large hospitals (more than 100 acute care beds) - 85%; small hospitals (less than 100 acute care beds) - 90%. All services provided in outpatient settings are based on the CPT code and assigned a dollar value based on the RVU and Conversion Factor.	Yes	Yes
Indiana	Yes	One (1) Additional Pregnancy Test w/in 30 days of FME & One (1) Additional Syphilis Test w/in 90 days of FME.	Yes	\$3,000 max. Benefits for Adults (18+) must be used within one (1) year from DOC. No time limit for children to use benefits.	None	Exam includes: Physician/SANE fee; facilities fees; pregnancy test & prophylaxis; STD testing (including Hepatitis & HIV); STD prophylaxis including Hepatitis (excluding HIV); alcohol & drug testing; ambulance; drug & alcohol testing; and counseling.	No	No
Iowa	Yes	Return visits to test for STDs - typically 3 months after date of crime and 12 months after date of crime. These return visits are reimbursed at the same rate as the initial exam: \$300 - Examination Facility; \$200 - Examiner Fees; <u>AND</u> actual costs of all laboratory tests and pharmacy charges related to the prevention of STDs.	No	N/A	Other	\$300 - Examination facility; \$200 - Examiner's fees; <u>plus</u> 100% of eligible services.	Yes	No - not unless the Victim requests that their insurance company be billed.

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Kentucky	No	N/A	No	N/A	Fee Schedule	<p><u>\$200 - Physician or SANE Fee</u>; <u>\$250 - Facility Fee</u> (includes use of hospital or sexual assault examination facility; radiology expenses; medical supplies; sterile supplies; and, repair of superficial wounds [relating to sexual assault wounds]); <u>\$100 - Laboratory Fee</u> - (includes diagnostic laboratory testing); and, <u>\$100 - Pharmacy Fee</u> - (includes medications and pharmaceuticals prescribed as a result of the examination and as part of basic treatment). **Exams performed at a Child Advocacy Center shall be reimbursed for actual costs up to, but not exceeding, the amount of reimbursement established by the Department of Medicaid Services.</p>	Yes - once the yearly appropriation from the State General Fund is depleted.	Yes
Maine	No	N/A	No	N/A	Flat Fee	<p><u>\$750 – Professional/Practitioner’s Services</u>; <u>Emergency Department</u> (emergency room, clinic room or office room fee; and, pelvic tray); <u>Laboratory</u> (fixed smear for sperm; blood testing for syphilis and Hepatitis B; HIV test; and cultures for gonorrhea, chlamydia, trichomonas and other STD’s); <u>Pregnancy Testing</u> (blood test or urinalysis); <u>Other Laboratory Tests</u> (that are required for the purpose of evidentiary examination); and <u>Medications</u> (pregnancy prophylaxis; sexually transmitted disease prophylaxis; one (1) dose sedative, antidepressant or tranquilizer; and anti-emetic).</p>	Yes - if necessary, however, the VCB has been able to make payments exclusively from State funds for appx. 10 years.	No
Massachusetts	Yes - <u>if medically necessary as a direct result of the crime.</u>	Follow up treatment include, but are not limited, to: pregnancy/STI testing; follow-up care with OBGYN/PCP; and, medications/prescriptions.	Yes	Yes - <u>must be seen by a licensed mental health care provider.</u>	None	Includes: Examiner's Fee; Facilities Fee; Ambulance; Colposcopy and/or Anoscopy; pregnancy test; STD testing (including Hepatitis & HIV); drug and/or alcohol testing; emergency contraception; STD prophylaxis (including Hepatitis & HIV); follow-up treatment (if medically necessary); and, counseling.	Yes	Yes - unless the Victim is uninsured or feels that submitting a claim to the insurance carrier would substantially interfere with his or her personal privacy or safety. The Program pays for co-pays and eligible costs not covered by insurance.

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Michigan	No	N/A	No	N/A	Fee Schedule	<u>\$400 - Sexual Assault Examination Fee</u> (includes Examiner's fee, facilities fee, dispensing pharmaceuticals, colposcopy/anoscopy, and related procedures); <u>\$125 - Lab Fee</u> (includes pregnancy test, STD testing including Hepatitis & HIV testing, and drug & alcohol testing); <u>\$75 - Pharmaceuticals Fee</u> (includes pregnancy prophylaxis, STD prophylaxis including Hepatitis & 3 day supply of HIV prophylaxis).	No	Yes - unless the Victim is uninsured or feels that submitting a claim to the insurance carrier would substantially interfere with his or her personal privacy or safety. The Program pays for co-pays and eligible costs not covered by insurance.
Mississippi	Yes - <u>Minors only</u>	Evidentiary exam only	No	N/A	Fee Schedule	<u>\$1,000 Aggregate: \$350 - Physician, Nurse Practitioner, or SANE Fee; \$450 - Facility Fee</u> (includes supplies, equipment and medications for the prevention of STD's, Pregnancy (ECP), Hepatitis B, and 3 day supply of HIV prophylaxis); and, <u>\$200 - Lab Tests</u>	Yes	Yes - if the Victim is covered by any federal benefit (Medicaid, Medicare, Tricare, V.A. or Mississippi Children's Health Insurance Plan [CHIPS]). No - if the Victim is uninsured or has private medical insurance.
Missouri	No	N/A	No	N/A	None	<u>0-13 yrs. old - FORENSIC Exam</u> includes: Examiner's Fee; Facilities Fee; Colposcopy and/or Anoscopy; pregnancy test, STD testing (including Hepatitis & HIV) and, drug and/or alcohol testing if the exam checklist indicates that incident was drug facilitated. <u>14+ yrs. old - FORENSIC Exam</u> includes: Examiner's Fee; Facilities Fee; Colposcopy and/or Anoscopy; and, drug and/or alcohol testing (if the exam checklist indicates that incident was drug facilitated). Does not include pregnancy test; STD tests; emergency contraception; STD prophylaxis; follow-up treatment; or counseling.	Yes	No

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New Hampshire	Yes	\$200 - One (1) Follow-up Visit (including lab and meds)	No	N/A	Fee Schedule	\$1000 aggregate: \$800 - Forensic/Medical Exam (includes Examiner's fee; facility fee; lab fees; and, prophylactic medication for pregnancy and STD's; \$200 - One (1) Follow-up Visit (including lab tests & meds)	Yes	Yes
New York	No	N/A	Yes	Covered by Forensic Exam Direct Claim <u>if</u> given and billed as part of Forensic Exam - not as follow up care.	Flat Fee	\$800 - Examination expenses may include examiner's fee; facilities fee; lab fees (including pregnancy testing, pregnancy prophylaxis, STD testing including Hepatitis & HIV, STD prophylaxis including Hepatitis & HIV [3 day], and tetanus vaccine); and counseling (if billed as part of the forensic exam and not as follow-up care).	Yes	<u>Yes</u> - if Victim chooses to use their personal health care insurance benefits instead of the OVS. <u>No</u> - if Victim is uninsured or chooses <u>not</u> to use their private medical insurance benefits. *If the Victim's personal health care insurance is billed, the Provided must accept that payment as payment in full - the OVS will not pay any balances.
North Carolina	No	N/A	No	N/A	Fee Schedule	Physician or SANE - \$350; Hospital/Facility Fee - \$250; Other Expenses Deemed Eligible by the Program (includes Pregnancy Test & Pregnancy Prophylaxis) - \$200.	Yes	No
Ohio	No	N/A	No	N/A	Flat Fee	\$532 - Includes Examiner's fee; Facilities Fee; Supplies; Colposcopy/Anoscopy; and STD Prophylaxis (excluding Hepatitis & HIV).	Yes	No

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Oklahoma	No	N/A	No	N/A	Fee Schedule	\$450 - Sexual Assault Examination Fee (includes the Examiner Fee and Facilities Fees); \$ 50 - Medications Fee (includes Pregnancy Prophylaxis and STD Prophylaxis [excluding Hepatitis & HIV]).	Yes	Yes - if the Victim is insured by federal insurance programs like Medicaid, Medicare and VA will be billed. If the Victim is not insured by a federally financed benefits program but is insured by a private health insurance company, the Victim <u>may choose</u> to have their insurance company billed rather than the Fund if they wish.
Oregon	No	N/A	No	N/A	Fee Schedule	\$380 - "Complete" Medical Assessment <u>or</u> \$455 if "Complete" Medical Assessment is performed by SANE. Exam must be performed w/in 84 hours and includes collection of forensic evidence using SAFE Kit. \$175 - "Partial" Medical Assessment <u>or</u> \$250 if "Partial" Medical Assessment is performed by SANE. Exam must be performed w/in 168 hours and <u>does not</u> include collection of forensic evidence using SAFE Kit. <u>PLUS</u> \$55 - Pregnancy Prophylaxis <u>and</u> \$100 - STD Prophylaxis	Yes	No - not unless the Victim requests that their insurance company be billed. If insurance is billed, the SAVE Fund cannot be billed. Insurance can be billed for services not covered by the Fund.

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Pennsylvania	No	N/A	No	N/A	Flat Fee	\$1000 - includes Examiner's Fees, Facilities Fees, Supplies, Lab Tests, and Medications for Pregnancy and STDs.	Yes	Yes, if the Victim has medical insurance that will cover the expense of the exam <u>and</u> agrees to his/her insurance being billed. However, Victim can also choose not to use their insurance and the VCAP will pay.
Rhode Island	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
South Carolina	No	N/A	No	N/A	Fee Schedule	<p><u>Medical Services:</u> Physician, FNP, NP Fee - \$105; SANE Fee - \$80; Emerg. Room Fee - \$75; Colposcopy Fee - \$90; Clinic Fee - \$50; and, Supplies - \$12. <u>Laboratory Services:</u> Gonorrhea Culture - \$12; Chlamydia Culture - \$35; NAAT - \$50; Herpes Culture - \$20, Vaginal Culture - \$20; Wet Prep/KOH Prep - \$10; Gram Stain - \$10; RPR, VDRL, Syphilis - \$10; Presence of motile sperm - \$5; Hepatitis B - \$40; HIV HTLVI - \$20; Urinalysis - \$18; Blood Drawing Fee - \$5; Urine Culture - \$20; Urine Pregnancy Test - \$20; and, Blood Pregnancy Test - \$25.</p> <p><u>Medications:</u> Rocephine (injection)-Ceftriaxone - \$85; Flagyl (tabs/each)-Metronidazole - \$3; Phenergen (tabs/each)-Promethazine - \$2.20; Phenergen (suppository 50 mg each) - \$12.74; Plan B Levonorgestrel - \$25; Orval (tabs/each)-Norgestrel - \$1.75; Zithromax - \$10 each; Lidocaine - \$21; and, Tetanus - \$21.</p>	VOCA funds are only used if the yearly appropriations from the State's General Fund is insufficient.	No

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Tennessee	No	N/A	No	N/A	Flat Fee	\$750 aggregate. Services may include those directly related to the collection of forensic materials for evidentiary purposes. Examination expenses may include emergency department; SANE, or physician fee; collection of specimens; lab work; medical examination for sexual trauma; or other necessary forensic-related treatment.	Yes	No
Texas	No	N/A	No	N/A	Fee Schedule	<p><u>\$700 aggregate: \$195* - Sexual Assault Examination Fee (includes Examiner's fee); \$233* – Sexual Assault Examination Fee w/Colposcopy (includes Examiner's fee); \$26 – Colposcopy Associated Office Fee (non-medical facility); \$71 – Anoscopy Fee; \$20 – Venipuncture Procedure Fee; \$250 – Facilities Fee; \$50 – Sexual Assault Kit Fee; \$100** – Supplies & Materials Fee (includes medical tape, surgical materials, gloves, or other supplies used in the exam but that are not part of the Kit); \$150 – Laboratory Procedures Fee (including but not limited to Pregnancy Test - \$6; Urine Analysis - \$9; Drug or Alcohol Screen - \$44; Chlamydia Culture - \$37; Gonorrhea Testing - \$16; Syphilis Test - \$11); \$20 – Specimen Handling Fee; and, \$106/hr.** – Additional Evaluation and Management Services Fee (includes exams in which additional time was required for various circumstances such as a language barrier between the SANE Nurse and Victim; Victim was uncooperative; Victim was under the influence of illegal substances; or Victim was a child).</u></p> <p>*Please note these procedures may not be billed together.</p> <p>**Requires documentation of procedure.</p>	Yes	No

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Utah	Yes	Testing and treatment for STDs for up to 4 weeks from the date of the exam.	No	N/A	Other	Professional Fees billed at flat fee depending on whether or not photographs were taken; Facility Fees billed at a flat fee; and the remainder of eligible services paid at 70% if provided by the hospital. *Utah has non-profit groups in communities across the State comprised of FNE/SANEs. These non-profit groups share a source of prophylactic and antibiotic medications which they received at a greatly reduced rate. The CVR will reimburse them 100% for these meds.	Yes	Yes, however, the CVR waives this requirement for the FNE/SANEs (non-profit groups) and pay them directly within a matter of days of doing the exam. The CVR can also waive this requirement for hospitals if it creates a conflict of some sort for the Victim.

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Vermont	Yes	The VCCVS Sexual Assault Program will pay for 2 medical follow-up visits, including Planned Parenthood visits, and follow-up care specific to the Victim taking HIV prophylactics.	Yes	VCCVS Sexual Assault Program will pay for up to 20 mental health counseling at the rate of \$70 per one hour session. Individual sessions will be pro-rated according to the length of the session based upon the above rates. VCCVS Sexual Assault Program will pay for up to 4 sessions prior to receipt of an initial treatment plan. The first 4 sessions are considered part of the initial 20 sessions of the treatment plan which the VCCVS Sexual Assault Program will pay. After the initial 4 sessions, to remain eligible for continued payment of mental health counseling expenses, the treatment provider must submit a current Mental Health Treatment Plan relative to the sexual assault.	Fee Schedule	Eligible expenses will be paid at a rate of 70%.	Yes	Yes, if the Victim has medical insurance that will cover the expense of the exam <u>and</u> agrees to his/her insurance being billed. However, Victim can also choose not to use their insurance and the VCCVS Sexual Assault Program will pay.

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Virginia	Yes - Evidentiary Exam Only - Children or Adults.	An explanation is required to ensure it is for forensic purposes only.	No	N/A	None	Exam includes Physician fee; SANE fee; facilities fees; pregnancy test and prophylaxis; STD testing (including Hepatitis & HIV); STD prophylaxis including Hepatitis (excluding HIV); ambulance (if medically necessary) drug & alcohol testing (for forensic purposes only); and, follow-up evidentiary exam (for forensic purposes only).	Yes	<p>Yes - if the Victim is insured by a Federally-funded insurance program (Medicaid, Medicare, Champus, Tricare, FAMIS or the Veterans Administration) or if the Victim wishes their private insurance company billed. The SAFE Program will reimburse any remaining eligible out-of-pocket expenses after insurance payment.</p> <p>No - if the Victim is uninsured or does not with their private insurance company billed.</p>

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Washington	Yes	Yes - X-rays, labs, and repeat physical exam <u>only</u> for the purpose of gathering evidence. Repeat blood testing for STDs for 13 months from the date of injury or initial examination.	Yes, but only for child victims who are unable to complete the physical sexual assault exam <u>after the examination has been initiated</u> . No benefits for adult victims.	A maximum of 3 counseling sessions may be authorized for the purpose of desensitizing the child victim to the sexual assault examination.	Other	<p>PROFESSIONAL FEES paid as follows: <u>Sexual Assault - Vitals Only, No Physical Exam</u> - MD/*Non-Facility - \$23.86, MD/**Facility - \$23.86, RN/*Non-facility - \$21.47, RN/**Facility - \$21.47; <u>Sexual Assault Examination Level 1</u> (5-45 minutes face-to-face with patient by medical provider(s). Requires history and physical examination. May also include forensic evidence collection kit, anogenital examination with colposcopic magnification, medical photography).- MD/*Non-Facility - \$333.11, MD/**Facility - \$235.26, RN/*Non-facility - \$299.79, RN/**Facility - \$211.73; <u>Sexual Assault Examination Level 2</u> (46-119 minutes face-to-face with patient by medical provider(s). Requires history and physical examination. May also include forensic evidence collection kit, anogenital examination with colposcopic magnification, medical photography).- MD/*Non-Facility - \$528.82.11, MD/**Facility - \$414.65, RN/*Non-facility - \$475.93, RN/**Facility - \$373.18; <u>Sexual Assault Examination Level 3</u> (120 minutes or more face-to-face with patient by medical provider(s). Requires history and physical examination. May also include forensic evidence collection kit, anogenital examination with colposcopic magnification, medical photography).- MD/*Non-Facility - \$588.42, MD/**Facility - \$466.39, RN/*Non-facility - \$529.57, RN/**Facility - \$419.75.</p> <p>/*"Non-Facility" means an independent clinic, center, or physicians' office.</p> <p>**"Facility" means hospital emergency department or hospital based sexual assault clinic operating under the same tax id number as the hospital. <u>FACILITY FEES, LAB FEES, PATHOLOGY, DIAGNOSTICS & RADIOLOGY</u> - paid according to the Labor & Industries fee schedule.</p>	Yes	No

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Wisconsin	No	N/A	No	N/A	None	N/A	No	Yes, if Victim reports & cooperates with law enforcement & prosecution AND agrees to allow their insurance to be billed. In this instance the Victim's claim would be paid through the State's regular compensation program and services in addition to the sexual assault forensic exam may be paid, i.e. lost wages, follow-up treatment, broken bones, etc. The SAFE Fund does not require that the Victim agree to have their insurance company or any other payer source (including themselves) billed for the exam.

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Alabama	No	No	No	Yes - however, they must be willing to report & cooperate w/law enforcement and must meet other eligibility requirements of the Crime Victims Compensation Program.	The Program attempts to negotiate the charges incurred at Hospitals. Charges incurred at SANE facilities are paid at 100%.
Arkansas	No	72 hours - this can be waived if good cause is shown.	No	Yes - however, they must be willing to report & cooperate w/law enforcement and must meet other eligibility requirements of the Crime Victims Compensation Program.	No payment will be made if Victim has a federally financed benefits program such as Medicaid, Medicare, Champus or V.A.
*Delaware - *Info from website ONLY - this State failed to respond to requests for additional information	No	?	?	Yes - however, they must be willing to report & cooperate w/law enforcement and must meet other eligibility requirements of the Crime Victims Compensation Program.	
Florida	No	No	120 days	Yes - however, they must be willing to report & cooperate w/law enforcement and must meet other eligibility requirements of the Crime Victims Compensation Program.	
Idaho	No	1 year	1 year	Yes - however, they must be willing to report & cooperate w/law enforcement and must meet other eligibility requirements of the Crime Victims Compensation Program.	

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Indiana	No	No	180 days	Yes - however, they must be willing to report & cooperate w/law enforcement and must meet other eligibility requirements of the Crime Victims Compensation Program.	
Iowa	No	No	1 year	Yes - however, they must be willing to report & cooperate w/law enforcement and must meet other eligibility requirements of the Crime Victims Compensation Program.	Entire section covering the Sexual Abuse Examination Payment Program can be found at 61 IAC 9.80-9.85.
Kentucky	No	No	No	Yes - however, they must be willing to report & cooperate w/law enforcement and must meet other eligibility requirements of the Crime Victims Compensation Program. The Board has the discretion to waive this requirement.	Current regulation pending, if passed, will allow reimbursement for additional services related to a sexual assault examination requiring HIV post exposure prophylaxis pursuant to a fee schedule.

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Maine	No	No	60 days	Yes - however, they must be willing to report & cooperate w/law enforcement and must meet other eligibility requirements of the Crime Victims Compensation Program.	Each Forensic Kit has a unique tracking number. Adhesive labels with the tracking number on them are included in the Kit. Providers are asked to assign a tracking number, such as a Patient Account Number or a Medical Records Number, to identify the Victim. Providers <u>must not</u> include the name of the Victim on their bills but must use the tracking number on the Kit and the tracking number they assigned to the Victim instead.
Massachusetts	No	No	3 years	Yes - however, they must be willing to report & cooperate w/law enforcement and must meet other eligibility requirements of the Crime Victims Compensation Program.	The Victim is responsible for completing and submitting the Sexual Assault Exam Expense Application - not the Provider.
Michigan	No	No - at the discretion of the FNE/SANE.	1 year	Yes - however, they must be willing to report & cooperate w/law enforcement and must meet other eligibility requirements of the Crime Victims Compensation Program. The Board has the discretion to waive this requirement.	

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Mississippi	No	72 hours. Payment for adult exams conducted after 72 hours will be considered on a case by case basis.	90 days - this time limit may be waived for just cause.	Yes - however, they must be willing to report & *cooperate w/law enforcement and must meet other eligibility requirements of the Crime Victims Compensation Program. The Division may waive this requirement if there is compelling health or safety reasons that would jeopardize the well being of the Victim.	If a person is arrested, charged or convicted of a sexual offense the County with jurisdiction shall pay for a medical forensic examination of the suspect to determine if the person has any STDs (including HIV at victim's request) and for collection of evidence. Miss Code §99-37-25. \$1,000 aggregate max paid among all providers involved in exam.

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Missouri	No	No	90 days	Yes - however, they must be willing to report & cooperate w/law enforcement and must meet other eligibility requirements of the Crime Victims Compensation Program.	<p>CD Children's Service Workers or Medical Providers who suspect abuse of children 0-13 yrs. old may make a referral to a SAFE-CARE Network provider for a SAFE-CARE examination. The SAFE-CARE Network provider will conduct a <u>NON-FORENSIC</u> exam which includes a complete medical history; comprehensive physical examination; an interview; complete genital examination; and basic office laboratory procedures. The Missouri HealthNet Division (MHD) will pay for exams covered by Missouri HealthNet. The Children's Division (CP) will pay for the exams not covered by Missouri HealthNet. The exam will be reimbursed at a special rate of \$187.50 (excluding laboratory tests). Laboratory tests will be reimbursed at MHD rates.</p>

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New Hampshire	No	No	No	Yes - however, they must be willing to report & cooperate w/law enforcement and must meet other eligibility requirements of the Crime Victims Compensation Program.	A unique serial number is provided on the end of the Evidence Collection Kit box and this serial number is used in place of the victim's name on all specimens and paperwork in non-reporting cases. Any person convicted of a sexual offense shall be tested for HIV and the results given to the Victim. In cases where the Program receives bills from multiple Providers exceeding the maximum \$800 Forensic/Medical Exam Fee or \$200 Follow-up Visit Fee, the fees will be prorated to allow a percentage to each Provider <u>provided that all of the bills are received prior to payment</u> . In the event that a Provider's bill is received after the Program has paid the maximum fee for that service, the Provider is required to write-off their bill for that service.
New York	No	96 hours - however, OVS will cover the cost of a forensic exam conducted beyond 96 hours for a child victim, or for any victim where good cause is shown for the delay.	1 year	Yes - the Crime Victims Compensation Program can accept the Medical Report of Forensic Exam to fulfill both the reporting and proof of crime requirements in lieu of a CJA Report for non-reporting Victims.	If non-forensic exam-related expenses are submitted by the Provider as part of the exam, the Provider is then precluded from later billing the Victim whether or not a compensation claim is later filed.

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North Carolina	No	No	1 year	Yes - however, they must be willing to report & cooperate w/law enforcement and must meet other eligibility requirements of the Crime Victims Compensation Program.	The Program also pays for all of the Rape Kits that are distributed across the State.
Ohio	No	96 hours - in cases where there is reason to believe that viable evidence may exist beyond this time period or where an exam may corroborate chronic injury or excessive force related to the sexual assault, the Examiner must submit an explanation along with the Reimbursement Request Form so that a decision can be made by the Division.	6 months	Yes - however, they must be willing to report & cooperate w/law enforcement and must meet other eligibility requirements of the Crime Victims Compensation Program.	Although at the current time, the Program <u>does not</u> pay for A/DFSA testing, they have created a Drug Facilitated Sexual Assault Protocol which provides assistance to Hospitals and Law Enforcement in quickly recognizing the possibility of a drug facilitated sexual assault. The Program has also developed a specific DFSA panel with AIT labs to focus greater attention on DFSA drugs only. They anticipate that this will save the Program money in laboratory testing fees - if, and when, the decision is made to pay for A/DFSA testing.
Oklahoma	No	120 hours	No	Yes - however, they must be willing to report & cooperate w/law enforcement and must meet other eligibility requirements of the Crime Victims Compensation Program.	In cases where there is both an Examiner Fee and a Facility Fee exceeding \$450, the fees are prorated, allowing a percentage to each Provider.

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Oregon	No	84 hours - "Complete" Medical Assessment. No forensic evidence is collected in a "Partial" Medical Assessment.	1 year	Yes - however, they must be willing to report & cooperate w/law enforcement and must meet other eligibility requirements of the Crime Victims Compensation Program.	Pregnancy Prophylaxis and STD Prophylaxis must be filled on-site in order to be reimbursed.
Pennsylvania	No	No	1 year	Yes - however, they must be willing to report & cooperate w/law enforcement and must meet other eligibility requirements of the Crime Victims Compensation Program.	SANE expenses are paid through the hospital or licensed health care facility. Follow-up forensic rape examination expenses and counseling may be considered on the Program's standard claim if eligibility requirements are met. New Claim Form being developed and will be distributed later in the year.
Rhode Island	N/A	N/A	N/A	N/A	Although the Crime Victim Compensation Program developed rules and regulations in 2008 to pay for the costs of forensic medical exams, Labor Unions representing the medical community continue to delay the program's implementation.

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South Carolina	No	120 hours	180 days	Yes - however, they must be willing to report & cooperate w/law enforcement and must meet other eligibility requirements of the Crime Victims Compensation Program.	Exams for children (17 and under) and vulnerable adults can also include radiographs/imaging studies. The fee schedule was developed by gathering costs from Providers within the State and averaging them. The SAP program will also pay \$175 for forensic interviews ordered by law enforcement for children 17 and younger.
Tennessee	No	No	1 year	Yes, for medically-related services not covered. However, they must meet other eligibility requirements of the Crime Victims Compensation Program, including reporting and cooperation.	\$750 aggregate max paid among all providers involved in exam.
Texas	No	96 hours	No	Yes - however, they must be willing to report & cooperate w/law enforcement and must meet other eligibility requirements of the Crime Victims Compensation Program.	Texas law requires law enforcement to pay for the cost of a forensic medical exam. Law enforcement applies to the Texas CVC program who reimburses law enforcement. Victims cannot be billed by Texas law.

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Utah	No, the Victim does not have to cooperate with law enforcement or prosecution in order for the CRV to pay. However, Utah Statute mandates that the medical provider must report to law enforcement that they have performed a sexual assault forensic exam in order to receive payment for their services.	No - at the discretion of the FNE/SANE.	1 year	Yes - however, they must be willing to report & cooperate w/law enforcement and must meet other eligibility requirements of the Crime Victims Compensation Program.	Violent Crime Compensation applications are included in the Evidence Kit. 98% of forensic exams will have an accompanying Violent Crime application with appx. 75% being approved.
Vermont	No	No - left to the discretion of medical personnel.	No	Yes - however, they must be willing to report & cooperate w/law enforcement and must meet other eligibility requirements of the Crime Victims Compensation Program.	Will not pay for Victims of sexual assault under the age of 18, however, those Victims may be eligible to receive some benefits under the Crime Victims Compensation Program if they meet eligibility requirements.
Virginia	No	72 hours - if a FNE/SANE believes that viable evidence may exist beyond this time period, the FNE/SANE must submit an explanation along with the Request for Payment form so that a decision can be made by the CICF.	1 year	Yes - however, they must be willing to report & cooperate w/law enforcement and must meet other eligibility requirements of the Crime Victims Compensation Program.	Health Care Providers are required by law to establish established negotiated agreements with CICF and are prohibited from billing patients for the discounted amount. If the Victim declines collection of evidence, the claim is not eligible for reimbursement.

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Washington	No, however there are several requirements under the law. There <u>must be a physical examination</u> performed and it must not be performed <u>solely</u> for the evaluation of the Victim's treatment needs. For CVCP bill payment purposes, urinalysis and blood tests are considered evidence collection. The physical examination does not require an anogenital examination.	No	1 year	Yes - however, they must be willing to report & cooperate w/law enforcement and must meet other eligibility requirements of the Crime Victims Compensation Program.	The CVCP requires a separate completed Sexual Assault Report form from each provider who examines a sexual assault victim.
Wisconsin	No. The SAFE Fund will pay if Victim does not wish to report & cooperate with law enforcement & prosecution <u>OR</u> if the Victim does not wish for their insurance to be billed <u>OR</u> if the Victim does not wish to be personally liable for the bill.	96-120 hours	1 year	Yes - however, they must be willing to report & cooperate w/law enforcement and must meet other eligibility requirements of the Crime Victims Compensation Program.	