

1 Department of Public Safety

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3 Crime Victims Reparation Board

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5 Adopted Permanent Rules Relating to Claim Procedures

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7 Rules as Adopted

8 7505.0100 DEFINITIONS.

9 Subpart 1. and 2. [Unchanged.]

10 Subp. 3. Party. "Party" means any claimant.

11 7505.0200 PURPOSE.

12 This chapter is intended to assure that no person before
13 this board shall have his or her rights, privileges, or duties
14 determined without regard to fundamental fairness.

15 7505.0400 COMMENCEMENT OF CLAIM.

16 A claim shall be deemed to have been commenced upon receipt
17 by the board of a claim form completed and signed by a claimant
18 or the claimant's representative.

19 7505.0600 SCOPE OF DISCOVERY.

20 Subpart 1. Information obtainable. Pursuant to the
21 investigation of a claim, the board may obtain from the claimant
22 and other persons all information reasonably related to the
23 validity of the claim, including but not limited to information
24 relating to the following subjects:

25 A. to E. [Unchanged.]

26 Subp. 2. Subpoena. In the course of an investigation the
27 board may issue subpoenas for the appearance of witnesses or for
28 the production of books, records, or other documents or initiate
29 such other discovery proceedings as by law are allowed.

30 7505.0700 COOPERATION WITH BOARD, ASSIGNMENT, SUBROGATION.

31 Failure by a claimant or claimant's representative to
32 complete forms, or otherwise to cooperate with the board's
33 investigation, may constitute a ground for denial of a claim.

1 The claimant shall assign his or her rights to recover
2 benefits or advantages from any source which is, or if readily
3 available to the claimant would be, a collateral source and
4 which is not deducted from the final award; provided that the
5 assignment shall not exceed the amount of the final award. The
6 claimant shall further agree to cooperate fully with the board
7 in any subrogation action brought by the board or the claimant.

8 7505.1900 DISQUALIFICATION BY PREJUDICE.

9 A hearing officer or any board member shall withdraw from
10 participation in a contested case at any time prior to the final
11 determination if he or she deems himself or herself disqualified
12 for any reason. Upon the filing in good faith of a timely and
13 sufficient petition of prejudice the hearing officer shall
14 determine the matter as a part of the record and decision in the
15 case. A withdrawal must be noted in the minutes of the board's
16 monthly meetings.

17 7505.2700 TREATMENT PLANS.

18 Subpart 1. **Applicability.** The board, in order to evaluate
19 the reasonableness of treatment provided claimants, shall
20 require suppliers of mental health, physical therapy,
21 chiropractic, medical, and home care services to submit
22 treatment plans before consideration of their charges as a part
23 of a reparations claim when the following time and charges
24 standards apply:

25 A. if mental health treatment is likely to continue
26 longer than six months after the date the claim is filed and the
27 cost of the additional treatment will exceed \$1,500, or if the
28 total cost of treatment in any case will exceed \$4,000;

29 B. if physical therapy treatment is likely to
30 continue longer than three months after the date the claim is
31 filed and the cost of additional treatment will exceed \$800, or
32 if the total cost of treatment in any case will exceed \$1,500;

33 C. if chiropractic treatment is likely to continue
34 longer than three months after the date the claim is filed and
35 the cost of additional treatment will exceed \$1,000, or if the

1 total cost of treatment in any case will exceed \$1,800;

2 D. if medical treatment for a single condition or
3 injuries resulting from a single incident is likely to continue
4 longer than three months after the date of injury and the cost
5 of additional treatment will exceed \$2,500, or if the total cost
6 of treatment in any case will exceed \$4,000; or

7 E. if licensed home care service, as defined in
8 Minnesota Statutes, section 144A.43, if more than five home
9 visits in total have been or will be delivered, regardless of
10 cost.

11 The board may request treatment plans for other services
12 provided to the victim if the total cost of the service exceeds
13 \$500.

14 Subp. 2. **Treatment plan contents.** Treatment plans must
15 include, but not be limited to, information concerning the date
16 treatment began and the actual or expected date of termination,
17 the diagnosis of record, measurable treatment goals, and the
18 proposed method for treatment including measurable outcomes,
19 information regarding preexisting conditions, and prognosis.

20 Subp. 3. **Submission procedures.** Forms for the submission
21 of treatment plans must be provided by the board. Forms will be
22 supplied at the time the board requests certification of charges
23 for treatment provided a claimant. Suppliers shall submit
24 treatment plans, where required by subpart 1, at the time the
25 certificate is returned to the board.

26 Subp. 4. **Treatment plan updates.** Treatment plans must be
27 revised to reflect current treatment status after the first six
28 months of treatment for which the board has provided
29 compensation and quarterly after that. The board may withhold
30 or deny benefits for failure to submit revisions as required in
31 this subpart.

32 Subp. 5. **Board action.** The board may use treatment plans
33 to aid in the determination of reasonableness of care, and may
34 grant or deny compensation for a specific service based upon
35 information submitted in a treatment plan. The board may also
36 request a provider of services to revise or restate information

1 provided in order to meet the board's requirements for
2 compensation.

3 Subp. 6. **Extension beyond termination dates.** If treatment
4 is likely to continue more than 30 days beyond the projected
5 date of termination submitted in the treatment plan, the
6 provider is responsible for submitting a new treatment plan and
7 a revised termination date. A revision must be considered by
8 the board at its regular monthly meeting. No compensation must
9 be authorized for services rendered more than 30 days beyond a
10 projected termination date without board approval of an
11 extension.

12 7505.2800 BOARD DETERMINATION OF REASONABLENESS.

13 Subpart 1. **Board consideration.** The board, in determining
14 reasonableness, shall consider any and all of the following
15 relative to a specific claim, or to a claim for compensation for
16 a specific service:

17 A. quantity of service proposed or provided;

18 B. time span and duration of actual or proposed
19 service;

20 C. adherence of service provider to professional
21 standards, with consideration to ethnic and cultural needs of a
22 claimant;

23 D. progress of treatment against standards presented
24 to the board in the professional treatment plan, where a plan
25 has been submitted;

26 E. relationship of provider to claimant; and

27 F. possible consequences of denial or reparations.

28 Subp. 2. **Utilization review.** Where the board is unable,
29 due to multiple caregivers or complex treatment issues, to
30 determine reasonableness, it may use the services of outside
31 experts to assist in a determination. This review shall
32 include, but is not limited to:

33 A. review of clinical records;

34 B. submission of a questionnaire to the claimant to
35 elicit specific information; and

1 C. interview or examination of the claimant.

2 7505.2900 CONTRIBUTORY MISCONDUCT.

3 The board shall reduce, by a minimum of 25 percent, any
4 claim submitted by or on behalf of a person who the board finds
5 has engaged in any of the following acts or behavior that
6 contributed to the injury for which the claim is filed:

7 A. used fighting words, obscene or threatening
8 gestures, or other provocation;

9 B. knowingly and willingly been in a vehicle operated
10 by a person who is under the influence of alcohol or a
11 controlled substance;

12 C. consumed alcohol or other mood-altering
13 substances; or

14 D. failed to retreat or withdraw from a situation
15 where an option to do so was readily available.

16 Any of these provisions may be waived in cases of domestic
17 abuse or sexual assault.

18 7505.3000 CLAIMS PRORATING.

19 Subpart 1. **Designation of monthly allotment.** Total annual
20 appropriations, grants, and other funds designated for the
21 payment of claims, excluding an annually determined set-aside
22 for emergency funds, must be equally divided among each month of
23 the fiscal year. The resulting amount is designated the
24 "monthly reparations allotment."

25 Subp. 2. **Requests in excess of monthly allotment.** If the
26 monthly reparations allotment minus any awards granted on an
27 emergency basis during the 30 days preceding the month in
28 question is less than the total dollar amount of reparations
29 claims eligible for payment in that month, the board shall pay
30 only a portion of each claim approved that month.

31 Subp. 3. **Payment ratio.** The payment ratio shall equal the
32 monthly reparations allotment minus any emergency awards granted
33 in the preceding month divided by the total dollar amount of
34 reparations awards eligible for payment in that month.

35 Subp. 4. **Excess allotment.** Where the amount of

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[REVISOR] RPK/AT AR1285

1 reparations awarded during a specific month equals less than the
2 monthly allotment, any excess will be carried forward to the
3 next month and added to the monthly allotment for that period.

4 Subp. 5. **Claim filing.** The payment ratio of the month in
5 which the claim or supplementary claim is approved is the
6 payment ratio which governs the claim or supplementary claim.

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8 REPEALER. Minnesota Rules, parts 7505.0500; 7505.0800;
9 7505.0900; 7505.1000; 7505.1100; 7505.1200; 7505.1300; 7505.1400;
10 7505.1500; 7505.1600; 7505.1700; 7505.1800; 7505.2000; 7505.2100;
11 7505.2200; 7505.2300; 7505.2400; and 7505.2500, are repealed.