



ATTORNEY GENERAL OF TEXAS  
GREG ABBOTT

# **Crime Victims' Compensation Presumptive Eligibility**



# Housekeeping

- **Please turn off cell phones and pagers or place in a silent mode.**
- **Breaks about every 45 to 50 minutes.**
- **Questions can be answered in presentations or by any staff during breaks.**



# **Crime Victim Services Mission Statement**

**To assist in the compassionate and effective delivery of crime victim services by offering information, resources, and financial assistance to crime victims and the organizations assisting them.**



# **Crime Victims' Compensation**

- **Administers the Texas Crime Victims' Compensation (CVC) Program, which provides reimbursement for statutorily defined expenses to victims of violent crime and their families.**
- **CVC assists eligible victims with payments for medical and counseling bills incurred because of the crime and can help families cover the cost of the funeral for a loved one who has been killed as a result of a violent crime.**



## **CVC Fiscal Year 2010 Highlights**

- **Received a total of 37,801 applications and sexual assault exam reimbursement claims. Of these:**
  - **29,464 were victim compensation applications**
  - **8,337 were sexual assault reimbursement claims**
- **\$74.4 million in payments**
- **Reviewed 84,422 bills and processed 53,995 warrants (checks) for payment.**



## **“So, where does the Fund get the money?”**

**It is not a tax based or general revenue funded program. No tax dollars are used.**

**Sources of funding in FY 2010 were:**

- **Court Fees**
- **Federal VOCA Grant**
- **Restitution**
- **Subrogation**
- **Other Receipts**
- **Gifts**



# Restitution

- **CVC pays benefits to an eligible victim**
- **At some point, an offender is apprehended and convicted**
- **At sentencing, the judge can order the defendant to pay restitution to the CVC Fund for what the victim was paid in eligible benefits**



# Subrogation

1. CVC pays benefits to, or on behalf of, a victim
2. Victim files and wins a civil lawsuit for damages or receives a settlement from perpetrator
3. Victim reimburses funds to CVC
4. Victim and their attorney are subject to prosecution for failure to notify CVC

Lawsuits

and

subsequent  
settlements

must be

related to

the crime.





# **Enabling Legislation**

**Texas Code of Criminal Procedure  
Article 56 subchapter B  
Article 56.31 through 56.64  
Crime Victims' Compensation Act**



# CVC Mandates

## Rights

**A victim has the RIGHT  
to request and receive  
Information about  
Crime Victims' Compensation**

Texas Code  
of Criminal  
Procedure,  
Article 56.02  
(a)(6)  
and  
TFC,  
57.002(6)

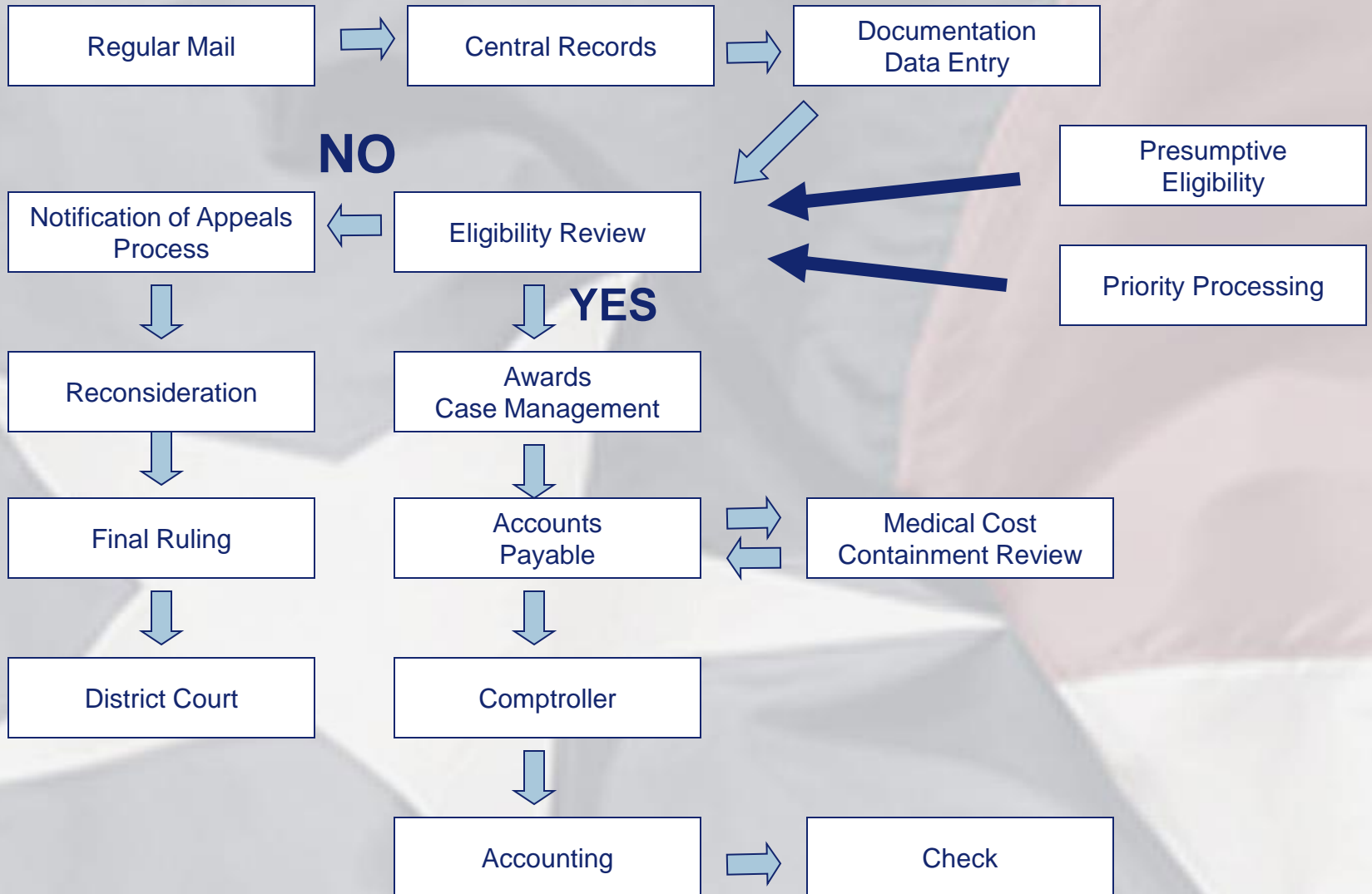


## **CVC Mandates**

- **T.C.C.P. Art. 56.07 Law Enforcement Mandate**
  - Initial contact with victim
  - Written notice
- **T.C.C.P. Art. 56.08 District and County Attorneys**
  - 10 day written notice
  - Assistance with application
- **T.C.C.P. Art. 56.60 Public Notice**
  - Posters in hospital emergency rooms



# Business Process





# Eligibility



## Who Is A Victim?

**Includes:**

**Peace officers, firefighters or individuals whose employment includes the duty of protecting the public**

**An individual who suffers physical or mental harm or death as a result of criminally injurious conduct**

**Note that every application has to have one victim, and only one victim**



## Who Is A Claimant?

- An authorized individual acting on behalf of a victim
- An individual who legally or voluntarily assumes the obligation to pay expenses
- A dependent of a deceased victim
- An immediate family or household member who requires psychiatric care or counseling
- An application can have multiple claimants, but only one victim



## **Eligibility Requirements “Who is Eligible to receive CVC?”**

- **A Texas or U.S. RESIDENT who becomes a victim of crime in Texas**
- **A Texas resident who becomes a victim in a country with no benefits**
- **A Texas resident who becomes a victim of a crime defined as an act of terrorism committed outside the United States (as of 9/1/97)**





## **Definition of Resident**

**A person who has a domicile in Texas or who lives for more than a temporary period in Texas, another state or the U.S., the District of Columbia, the Commonwealth of Puerto Rico, or a possession or territory of the U.S.**



# **Criminally Injurious Conduct**

**Criminally Injurious Conduct refers to crimes that:**

- **Are attempted or occur**
- **Pose a substantial threat of personal injury**
- **Would be punishable by fine or imprisonment**



## **CIC Crimes Eligible for Reimbursement**

**Crimes against persons that cover a range from simple assault to homicide, and include such crimes as family violence and child sexual assault**

**Also included are**

- **Crimes of intentional injury with an automobile, boat or plane**
- **Failure to stop and render aid (Hit and Run)**
- **Vehicular crimes involving drugs or alcohol**
- **Intoxication-related crimes (assault, manslaughter or criminally negligent homicide)**



## **Applications received by type of crime FY 2010**

- **Assault/Aggravated Assault** **50.4%**
- **Sexual Abuse of a Child** **15.7%**
- **Sexual Assault** **5.6%**
- **Robbery** **6.0%**
- **Homicide** **4.2%**
- **DWI** **3.3%**
- **Failure to stop and render aid** **2.9%**
- **All other types of crime are less than 11.9%**



## Denial or Reduction Behavior Factors

*If the person —*

all are  
possible  
factors,  
the entire  
situation is  
reviewed

- **Was engaged in illegal activity (deny or reduce)**
- **Shares in the responsibility for the crime (deny or reduce)**
- **Fails to cooperate with law enforcement and prosecution efforts (deny)**



## **However...**

**There is no requirement that a suspect be**

- **Identified**
- **Apprehended**
- **Charged**
- **Convicted**

**for a victim to apply for and be awarded compensation.**

**There is a requirement for the victim to cooperate throughout the criminal justice process.**



## **CVC Reporting Requirements Law Enforcement**

- **Prior to 9/1/97 the crime must be reported to law enforcement within 72 hours.**
- **On or after 9/1/97 the crime must be reported to law enforcement within a reasonable period of time but not so late as to interfere with or hamper the investigation and prosecution**
- **The program has the discretion to waive the reporting requirements if:**
  - **The victim is a child**
  - **Extraordinary circumstances hampered the reporting**



# **CVC Filing Requirements**

## **To CVC Program**

- **Prior to 9/1/97, One Year**
- **On or after 9/1/97, Three Years**
- **Exceptions:**
  - **Good Cause**
  - **Child victim through age 18 (pre-1997)**
  - **Child victim age 18 to 21 (1997-present)**
  - **Victim physically incapacitated**





## **CVC Application**

**An application is considered complete and will be processed when the application:**

- **Is filled out in its entirety**
- **Is signed by a victim or a valid claimant**
- **Provides law enforcement information**
- **Provides any other information requested by the OAG**



## **CVC Application**

- **Updated CVC application is on the web page and available in English and Spanish**
- **Why was the application updated?**
  - **Always reviewed after legislative session to assure it meets statutory requirements**



# Sample of CVC Application

## IMPORTANT AFFIDAVIT

This affidavit is part of your application and must be completed and signed before action can be taken on the application. **READ EVERYTHING BEFORE YOU SIGN AT THE BOTTOM.**

**Subrogation Agreement.** In accordance with Texas Code of Criminal Procedure, Article 56.52, I agree to notify the Crime Victims' Compensation (CVC) Program of the Office of the Attorney General in writing before I file a lawsuit against another party as a result of this crime. I further agree that I shall not settle or resolve any such action without prior written authorization from CVC. If I recover or anticipate recovery of any money at any time, by judgment, settlement, restitution, collateral source or any other income as a result of the incident that gave rise to this claim, I agree to notify and/or repay CVC for any and all amounts that CVC has awarded to me. I agree that any cause of action that arises between me and the Office of the Attorney General as a result of this claim will be brought in Travis County.

**Authorization for Release of Information.** I hereby authorize any financial institution, social service agency, government agency, hospital, physician, mental health facility, counselor, psychologist, psychiatrist, employer, insurer or other person with information relating to financial, health or employment status to release information concerning this application for benefits to the employees of the Crime Victims' Compensation program of the Office of the Attorney General as needed to process this claim. This information is to include, but is not limited to, financial, employment, diagnosis and treatment information. A copy of this signed release will be considered the same as the original.

**Affirmation and Authorization.** I swear and affirm under penalty of perjury under the laws of the State of Texas (Penal Code §37.02) that the information provided in the application for Texas Crime Victims' Compensation and any additional information that I provide is true and correct. I understand that the Texas Attorney General or any agent or representative of the office has the right to verify the information provided. I understand that if false, misleading or intentionally incomplete information is provided, my claim for benefits will be denied and I may be subject to criminal punishment under the Texas Penal Code and administrative penalties under the Texas Code of Criminal Procedure, Chapter 56.

**VICTIM OR CLAIMANT MUST SIGN BELOW IN ORDER TO PROCESS THIS APPLICATION**

Victim's Signature **X** \_\_\_\_\_

Printed Name \_\_\_\_\_ Date \_\_\_\_\_

Victim's SS# \_\_\_\_\_ Date of Birth \_\_\_\_\_

If the victim cannot sign the application (minor or incapacitated adult), the claimant must sign here in order to process this application.

Claimant's Signature **X** \_\_\_\_\_ Relationship to victim \_\_\_\_\_

Printed Name \_\_\_\_\_ Date \_\_\_\_\_

Claimant's SS# \_\_\_\_\_ Date of Birth \_\_\_\_\_



## **3 CVC Application Types**

- ▶ **Regular (via mail)**
- ▶ **Priority Processing Request (via fax)**
- ▶ **Presumptive Eligibility (via fax)**



## **Regular Processing**

- **Application received by CVC**
- **Mail routed to Documentation Section for processing (2-5 days)**
- **Offense report requested and received (15-30 days)**
- **Additional documentation requested if necessary (15-30 days)**
- **Claim routed to Eligibility Section for decision**



# Priority Processing Request

1. **Priority Processing Request letter from victim or Advocate stating “undue hardship” (sample included)**
2. **Complete Application**
3. **Offense Report (if unavailable, Det. name and phone #)**
4. **Information needed to pay a bill**



# Priority Processing Reference

- ▶ Designated Fax # (512) 370-9837
  
- ▶ Contacts:
  - Emma Dunlap  
(512) 936-1260  
[emma.dunlap@oag.state.tx.us](mailto:emma.dunlap@oag.state.tx.us)
  
  - Queen Edwards  
(512) 936-1650  
[queen.edwards@oag.state.tx.us](mailto:queen.edwards@oag.state.tx.us)
  
  - Robert Rodriguez  
(512) 936-1657  
[robert.rodriguez@oag.state.tx.us](mailto:robert.rodriguez@oag.state.tx.us)



# **Presumptive Eligibility Application**

## **What is Presumptive Eligibility?**

- **Streamlined application process**
- **Partnership with advocates submitting necessary documents for review**
- **The PE process routes directly to one fax line**
- **Not a delegation of decision authority outside the Office of the Attorney General**





# Who Can Use PE and How?

## Who?

- **Law Enforcement and Criminal Justice advocates**
- **Advocates and victim services agency staff**

## How?

- **Direct submission by those in LE/CJ who have access to complete offense reports**
- **Partnership Relay between advocates (without O.R. access) and LE/CJ in the local community**



# Presumptive Eligibility Package

- ▶ **PE Coversheet**
- ▶ **Application**
  - **Completed and signed**
- ▶ **Offense Report**
  - **Full offense report**
- ▶ **Support Documents**
  - **Requirements needed to process and pay a bill**



## PRESUMPTIVE ELIGIBILITY COVERSHEET

CLAIM NUMBER (CVC Use Only) \_\_\_\_\_

VICTIM NAME \_\_\_\_\_

VICTIM AGE \_\_\_\_\_

CLAIMANT NAME and RELATIONSHIP TO VICTIM \_\_\_\_\_

TYPE OF CRIME \_\_\_\_\_

ADVOCATE'S NAME \_\_\_\_\_

ADVOCATE'S AGENCY \_\_\_\_\_

ADVOCATE'S PHONE \_\_\_\_\_

ADVOCATE'S EMAIL \_\_\_\_\_

- Application is complete.
- Offense report accompanies application.
- Supporting documents for eligibility are included.
- Bills and/or other documents are included.

I verify that the identified information is complete and attached:

\_\_\_\_\_  
Advocate's Signature

\_\_\_\_\_  
Advocate's Presumptive Eligibility User ID Number

FAX PACKET TO: (512) 370-9995

Please answer the following questions. Additional definitions may be found on the reverse of this page.

- |    | Yes                      | No                       |   |
|----|--------------------------|--------------------------|---|
| 1. | <input type="checkbox"/> | <input type="checkbox"/> | Victim <b>reported</b> crime to police or public safety within a reasonable time so as not to hinder the investigation (crimes on or after 9/1/97) <b>or</b> within 72 hours of crime (occurring prior to 9/1/97).                              |
| 2. | <input type="checkbox"/> | <input type="checkbox"/> | Victim <b>filed</b> application with CVC within three years of date of crime (occurring on or after 9/1/97) <b>or</b> within one year (date of crime before 9/1/97). If victim was a minor, must report within above times after 18th birthday. |
| 3. | <input type="checkbox"/> | <input type="checkbox"/> | The victim is cooperative with law enforcement. <b><u>If not, please explain below.</u></b>   |
| 4. | <input type="checkbox"/> | <input type="checkbox"/> | The crime occurred in Texas <b>or</b> to a Texas resident visiting another state or country <b>or</b> was an act of international terrorism.  |

### Summary of the Crime:

- Circumstances of the crime (suspect(s), if known, victim(s) and relationships, what happened): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- Injuries and how they were received (unless sexual assault, then reference OR): \_\_\_\_\_  
\_\_\_\_\_
- Other information/comments (please be specific and include disposition of suspect(s), e.g. incarcerated, outstanding warrant, no prosecution intended, etc.): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- Complete the whole form
- Provide advocate info
- PE user ID
- Answer questions and provide summary
- Caution: Open Record concerns



## **Advocate's PE User ID Number**

### **Year/Month/Day + your initials**

In an example using an Advocate named Mary Jane Smith on a CVC PE training date of February 4, 2011:

**Mary Jane Smith > MJS**

**February 4, 2011 > 110204**

**PE User Id Number = 110204MJS**



# Presumptive Eligibility Coversheet

## ▶ PE Coversheet

- Advocate information
- Open records caution
- For other information/comments
  - \*\* Please provide details regarding suspect disposition if known
- PE number = PE training date plus advocate initials



## **Benefits of Presumptive Eligibility**

- ▶ **PE “Complete Application”** when submitted by fax goes directly into workflow, eliminating data entry steps in processing
- ▶ **Partnership through relay is “win-win” for all concerned; it benefits advocates and better serves victims**
- ▶ **Both victims and advocates see results promptly**



## Presumptive Eligibility Reference

- ▶ Use a PE Coversheet only on PE applications, not with priority applications
- ▶ To be a PE “Complete Application,” it must be faxed
- ▶ Attach any bills and forms needed for specific awards
  - If we have a bill we can make a payment, we cannot reimburse without a complete bill



# Presumptive Eligibility Contacts

- ▶ **Diana Leal, Assistant Eligibility Manager**  
**512-936-1265**  
**[diana.leal@oag.state.tx.us](mailto:diana.leal@oag.state.tx.us)**
- ▶ **Gloria Torrez, PE alternate point of contact**  
**512-936-1258**  
**[gloria.torrez@oag.state.tx.us](mailto:gloria.torrez@oag.state.tx.us)**
- ▶ **Robert Rodriguez, Eligibility Manager**  
**512-936-1657**  
**[robert.rodriguez@oag.state.tx.us](mailto:robert.rodriguez@oag.state.tx.us)**





# Awards

**Up to:**

- **\$25,000 for crimes prior to 9/1/97**
- **\$50,000 for crimes on or after 9/1/97**

**For reimbursement of medical costs, counseling, lost wages, funeral costs, and other costs resulting from the crime.**

**Does not include property loss or damage**



## **Applications paid by type of crime FY 2010**

- **Assault/Aggravated Assault**                      **59.9 %**
- **Sexual Abuse of a Child**                              **2.7 %**
- **Sexual Assault**    **1.5 %**
- **Robbery**    **10.3 %**
- **Homicide**    **9.2 %**
- **DWI**    **6.6 %**
- **Failure to stop and render aid**                      **6.0 %**
- **All other types of crime are less than 3.8 %**



# Award Types

- **Medical**
- **Psychiatric Care/Counseling**
- **Loss of Earnings**
- **Loss of Support**
- **Funeral and Burial**
- **Relocation and Rental**
- **Child or Dependent Care**
- **Crime Scene Clean-Up**
- **Items Rendered Unusable**
- **Travel**
- **Emergency Award**



# Payer of Last Resort

## CVC is the Payer of Last Resort

▶ **All collateral sources must pay first**

- Medicaid
- Health Insurance
- Medicare
- Workers' Comp
- Auto Insurance



# Medical Expenses

- ▶ **Includes:**
  - **Hospital expenses**
  - **Doctor's fees**
  - **Prescriptions**
  - **Emergency Room**
  - **Ambulance**
  - **X-Rays**
  - **Rehabilitation**
  - **Nursing home**
  - **Dental**
  - **Eye care**



# Medical Expenses

- Paid according to Worker's Comp medical fee guidelines ( [www.tdi.state.tx.us/wc/indexwc.html](http://www.tdi.state.tx.us/wc/indexwc.html) )
- Victim not responsible for difference, unless victim had benefits reduced
- Medical expenses are only limited by the funding available in the claim
- Dental expenses are paid at the amount billed or the mean amount published in the current ADA Survey of Dental Fees, whichever is less
- Reimbursements for medical expenses must be submitted within 5 years of the date of service, unless extenuating circumstances exist



## **Psychiatric Care/Counseling**

**When counseling is needed, get preauthorization if required**

- **Inpatient:**  
**\$600 per day with a maximum 30 day stay (for victim only)**
- **Outpatient:**  
**\$3,000 (victim and claimant)**

**To be reimbursed for psychiatric medications, a victim or claimant must be in counseling.**



# **Psychiatric Care/Counseling**

- **Psychiatrist**
- **Psychologist**
- **Clinical Nurse Specialists in Psychiatry**
- **Licensed professional counselor**
- **Marriage and Family Therapist**
- **Licensed Master Social Worker/Advanced Clinical Practitioner**





## Loss of Earnings

- **If employed, weekly net earnings multiplied by the disability period**
- **Limited to \$500 per week**
- **If unemployed, will consider situations that demonstrate the victim would have been employable. Benefit would be based on anticipated loss of future earnings**



## **Cont'd Loss of Earnings**

*May be paid for time lost from work—*

- **While seeking medical treatment for physical and/or emotional injuries (limited to four hours)**
- **While participating with criminal justice system requirements (limited to four hours)**
- **While attending funeral of the victim(effective 9/1/03,household members and immediate family)**



## Loss of Support

- To dependents of a murder victim- up to the value of the claim
- To dependents of victims (usually family violence) 90 days
- Limited to \$500 per week
- Requires employment verification
  - From employer, TWC, or income tax return from IRS but wages earned must be verifiable



# Funeral and Burial

- **Maximum of \$4,500**
  - \*additional funds available to transport body**
- **What is covered?**
  - **Funeral service**
  - **Casket, urn**
  - **Graveside service**
  - **Cemetery expenses**
  - **Marker/headstone**
  - **Cremation**
  - **Flowers, musician fees, burial clothing for the deceased**



# Relocation

## Relocation Costs

- Cost of Move
- Travel Expenses
- Security Deposits
- Utility Deposits
- Moving Van

- For victims of family violence (6/19/99)
- For victims of sexual assault in their residence (9/1/2001)
- **\$3,800 Total Benefit**
- **One time award:**
  - Up to \$2000 for Relocation
  - Up to \$1800 or 3 months for Rent



## **Child or Dependent Care**

- Only available as a NEW EXPENSE resulting from the crime
- Children (14 years and under) or dependent adults
- Care must be provided by licensed provider
- \$100 per week per child or dependent (limited to 90 days, except for dependents of deceased victims), for date of crime 5/8/05 or after



## **Crime Scene Clean-Up**

- **\$750 limit**
- **Commercial cleaning company**
- **Will reimburse for cleaning supplies when work is done by volunteers**



## **Items Rendered Unusable**

- **\$750 limit**
- **Items seized as evidence and rendered unusable by law enforcement**
- **This is the only property for which reimbursement can be paid by CVC**





# Travel

**Travel expenses due to participation in or attendance at:**

- **The investigation prosecution, or judicial processes; also post conviction and post adjudication-involvement**
- **The execution of the perpetrator. (effective for dates of travel 6/21/03)**
- **Seeking necessary medical treatment and counseling services**
- **The funeral of the victim for immediate family and household members. (9/1/03)**



# Travel

- **Exceeds twenty miles (one way)**
  - Necessary & reasonable transportation
  - Commercial transportation/personal vehicle
- **Exceeds sixty miles (one way)**
  - Meal and lodging expenses
  - Commercial lodging
  - State rate

**Crimes on or  
after 9/1/97**



## **Catastrophic Injuries** ***Total and Permanent Disability***

**Above the base award, catastrophic benefits are**

- **Additional \$25,000**  
**(for crimes occurring September 1995-97)**
- **Additional \$50,000**  
**(for crimes occurring on or after September 1, 1997 to Aug 31, 2001)**
- **Additional \$75,000**  
**(for crimes occurring on or after September 1, 2001)**



# **Catastrophic Injuries Total and Permanent Disability**

- **Durable Medical Equipment (Sept.1, 2001)**
- **Rehabilitation Technology (Sept. 1, 2001)**
- **Long-term Medical Expenses (Sept. 1, 2001)**
- **Home and Vehicle Wheelchair Accessible**
- **Rehabilitation**
- **Lost wages**
- **Job Training**
- **Home Health Care**
- **Training in the Use of Special Appliances**



## **Emergency Award**

- **\$1500 maximum**
- **Must be paid from an existing or anticipated benefit- it is not a “free award”.**
- **All applications are evaluated for EA need**
- **May be considered for situations that pose an undue hardship**
- **Decision made by CVC staff based on “best interest of the victim”**



# **Appeals Process**

**The victim or claimant has the right to appeal a decision (eligibility or awards)**

- 1. Reconsideration**
- 2. Final Ruling Hearing**
- 3. District Court**



## Claim closure due to fraud

Fraud statutes – CVC closes claims pursuant to:

- **Texas Code of Criminal Procedure, Article 56.41 (b)(7)**  
**(b)** The attorney general shall deny an application for compensation under this subchapter if:  
**(7)** the claimant or victim knowingly or intentionally submits false or forged information to the attorney general.
- **Texas Code of Criminal Procedure, Article 56.38 (b)**  
The attorney general may investigate an application.
- **Texas Code of Criminal Procedure, Article 56.47(a)**  
The attorney general, on the attorney general's own motion, or on request of a claimant or victim, may reconsider;  
(1) a decision to make or deny an awards; or  
(2) the amount of the award.



## **Claim closure due to fraud**

### **Lost wages**

- **Victim was awarded lost wages.**
- **CVC received information that victim submitted two false employment verification documents and also forged HR Director's signature to falsely show they were employed.**
- **Victim was charged and arrested with Tampering with a Governmental Record.**
- **Victim submitted false medical documentation in order to continuing receiving lost wages.**
- **Victim, a nurse, had been terminated from their job due to felony forgery convictions but falsely indicated that it was due to a crime related injury**





## **Claim closure due to fraud**

### **Relocation:**

- **Victim awarded relocation but claimed she never received the check.**
- **CVC processed a stop payment and issued a 2<sup>nd</sup> check**
- **Victim claimed they never received the 1<sup>st</sup> check, Comptroller's records revealed both checks had been cashed.**
- **Victim was charged with Theft.**
  
- **Victim submitted a falsified lease**
- **CVC called apartment complex and was advised victim was not approved**
- **Victim was charged with Tampering with a Governmental Record**



# **Sexual Assault Exam Reimbursement**

**Reimburse law enforcement for the reasonable costs of a sexual assault examination of a victim**

**Full details and application at OAG web site**

**A separate claims process from victim claims**

**Contact person: Juanita Sepeda 512-936-1246**



# Address Confidentiality Program

- The Address Confidentiality Program (ACP) creates a legal avenue for victims of family violence, stalking, and sexual assault to keep their residential, business, and/or school address out of public record through a free mail forwarding system operated by the Office of the Attorney General.
- The Address Confidentiality Program is a safety tool for victims of family violence, sexual assault, or stalking.
- It is not a witness protection program or guarantee of safety.
- The goal of the program is to work in conjunction with a safety plan to assist victims of family violence, sexual assault and stalking in their effort to keep their address confidential.

Address Confidentiality Program  
P.O. Box 12199 MC 069  
Austin, Texas 78711-2199

**[Crimevictims@oag.state.tx.us](mailto:Crimevictims@oag.state.tx.us)**

**512-936-1750**

**888-832-2322**



# OAG Web Site for CVC

**What is the OAG Web Site for Crime Victim Compensation?**

**<http://www.oag.state.tx.us/victims/cvc.shtml/>**

**What is available on the OAG Web Site?**

- **Eligibility, Benefits, & Applications**
- **Basic Qualification Requirements**
- **What Crimes Are Covered**
- **Who Is Not Eligible**
- **What Expenses Are Eligible**
- **How to Apply**
- **Application Review**
- **Right to Appeal**
- **Request CVC Claims Management System (Remote Users Access)**
- **Forms**
  - **CVC application**
  - **Sexual Assault Exam Reimbursement Form**
  - **Relocation Forms**
  - **Travel Forms**
  - **Training Material Request Form**



# **CVC Claims Management System**

## **What is Claims Management System (CMS)?** **(also referred to as Remote Users Access)**

- **CMS is a tool applicable users can access to view basic CVC claim information via the internet.**
- **There are three levels of security access to system:**
  - 1. Law Enforcement**
  - 2. Non-Profit Victim Advocates**
  - 3. Service Providers**



# **CVC Claims Management System**

- All users are able to view general case information.
- Law Enforcement and Advocate accounts allow the user to view general billing information and case notes.
- Service Provider accounts allow the user to view only those claims for which they have provided services based on their tax ID.
- CVC distributes new or updated information via CVC Claims Management System.

**Request CVC Claims Management System  
by e-mail:**

**[CVCRemoteUsers@oag.state.tx.us](mailto:CVCRemoteUsers@oag.state.tx.us)**

*Crime Victim Services Division- Crime Victims' Compensation Program*



**Office of the Attorney General  
Crime Victim Services Division**

**CVC Program**

**P.O. Box 12198**

**Austin, TX 78711-2198**

**[www.TexasAttorneyGeneral.gov](http://www.TexasAttorneyGeneral.gov)**

**(512) 936-1200 or 1-800-983-9933 Main Number**

**(512) 320-8270 General Fax Number**

**National Association of Crime Victim Compensation Board web site has  
links to each state's CVC program**

**[www.nacvcb.org](http://www.nacvcb.org)**