



LB 315: PROTECTING SURVIVORS OF DOMESTIC AND SEXUAL VIOLENCE FROM DEBT COLLECTORS

NO survivor should be caught in a cycle of debt because they sought the medical care they needed in the aftermath of a sexual assault.

Access to medical care is an essential resource for many survivors. The risk of accruing significant medical debt and associated negative financial consequences, such as a damaged credit rating, can serve as a barrier to survivors seeking appropriate care for their injuries. LB 315 will prevent health care providers from referring medical bills to collection agencies for related treatment from injuries arising from sexual assault, domestic assault and child abuse, reducing the financial hardship survivors experience when seeking medical services.

LB 315 does NOT prevent a health care provider from seeking reimbursement for health care services from the survivor, insurance or other available forms of payment—it simply prevents a survivor from being sent to collections.

Why is it important that *LB 315* specifically supports victims of sexual and domestic assault?

Domestic and sexual violence cases are frequently underreported in comparison to cases involving other violent crimes; nearly half of all instances of domestic violence and more than two out of three sexual assaults go unreported to police.¹ Whereas survivors might be less likely to report what has happened to them, oftentimes pressing injuries require them to seek care from medical professionals. Health care providers play a unique role in identifying survivors by providing appropriate care and referring victims to other services and professionals.

LB 315 ensures that survivors can receive needed care and not experience a burden of debt after their visit. By supporting this greater access to care, medical professionals ensure survivors are identified, their situations are reported as needed, and appropriate support and intervention take place.



Survivors of intimate partner violence on average **pay almost 30% of medical costs out-of-pocket.**²



Women who are **survivors of abuse experience 42% higher health care costs** than non-survivors.³



Approximately **44% of victims raped** by an intimate partner who receives medical care **spend one or more nights in the hospital.**⁴

The National Crime Victimization Survey found that **36.2% of the women who were raped by an intimate partner sustained an injury**, other than the rape itself, during their most recent victimization.⁵

LB 315 aligns with the Women's Fund values of: **Bodily Autonomy, Community Voice and Equity.** To learn more about our mission, vision and values, visit www.OmahaWomensFund.org.



How does **LB 315** support survivors?

LB 315 makes it unlawful for a health care provider to:

- Refer a medical bill related to the treatment of injuries from sexual assault, domestic assault or child abuse to a collection agency against the victim or the victim's family.
- Distribute information about the status of payment that would affect the victim or the victim's family's credit rating in any way.
- This bill will create necessary consistency among health care providers across the state to ensure that survivors are not being sent to debt collections no matter where they receive care or whom they receive care from.



LB 315 aims to protect survivors from debt collectors but **DOES NOT PREVENT HEALTH CARE PROVIDERS FROM SEEKING PAYMENT FOR THE SERVICES** from the victim, insurance companies or any other source.

¹ U.S. Department of Justice. (September 2020). "Criminal Victimization, 2019." <https://bjs.ojp.gov/content/pub/pdf/cv19.pdf>

² McLean, G., & Gonzales Bocinski, S. (August 2017). "The Economic Cost of Intimate Partner Violence, Sexual Assault, and Stalking," Institute for Women's Policy Research. <https://evawintl.org/wp-content/uploads/TheEconomicCostofIntimatePartnerViolenceSexualAssaultandStalkingFactSheet.pdf>

³ Ibid.

⁴ Planty et al. U.S. Department of Justice. (2013). "Female victims of sexual violence, 1994-2010." <https://www.bjs.gov/content/pub/pdf/fvsv9410.pdf>

⁵ Department of Health and Human Services, CDC. (March 2003). "Costs of Intimate Partner Violence Against Women in the United States." <https://www.cdc.gov/violenceprevention/pdf/IPVBook-a.pdf>