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## October 15, 2007 -

Commissioner Arthur Coccodrilli Chairman Independent Regulatory Review Commission 333 Market Street, 14<sup>th</sup> Floor Harrisburg, PA 17101

## RE: FINAL FORM REGULATIONS #10-182(#2577) RELATING TO SEXUAL ASSAULT VICTIM EMERGENCY SERVICES

## Dear Commissioner Coccodrilli:

As Executive Director for the Pennsylvania Coalition Against Rape(PCAR) I write on behalf of our statewide network of 52 sexual violence centers that provide counseling, crisis intervention, referral services; hospital court and police accompaniment; prevention education, and community outreach. PCAR centers offer crisis support and counseling 24 hours a day, seven days a week.

We believe that victims have the right to complete information regarding medical and treatment options available. Health care providers impart information concerning sexually transmitted disease and HIV/AIDS treatment, information concerning the rape exam kit and evidence collection, or information concerning any other medical treatments deemed necessary for the physical, emotional, and mental well being of a client. The victim is also entitled to information about and the option of pregnancy prophylaxis. It is the victim's right to determine what is the best option for her. As the victim can begin to feel that she is in control, once again, she can begin to feel the journey of the healing process.

PCAR and its member centers have supported a legislative approach to providing standardized medical treatment, in this session House Bill 288. There is an amendment pending to House Bill 288 which would provide for a hospital to contract with an independent entity to provide services which the hospital will not provide. It is our understanding that this was a compromise reached in the state of Connecticut. PCAR believes that this may be a legislative solution that would be acceptable to all stakeholders.

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Finally, although we support the regulations as an attempt to acknowledge existing Pennsylvania law and provide as comprehensive coverage to as many victims as possible, we are concerned about the transportation provisions in Section 117.57. We hope that the Department of Health will provide more detailed policy guidance in the transportation provisions, as the logistics of transporting victims; particularly in rural areas are far from uniform. For example, there are counties who do not have 24 hour pharmacy access. There are concerns about whether or not family or friends would be supportive and available to transport a victim at their final destination. How would the medication be paid for, if the victim is transported to a pharmacy or another hospital. These are situations that should be addressed in order to provide clear guidance to health care professionals, law enforcement and advocates, since we all have as a .common goal, the comprehensive care of victims of the heinous crime of sexual violence.

Very truly yours,

Delilah Rumbura Executive Director