

# ENFORCING A SUPPORT ORDER

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## Reviewing Health Insurance Orders

CS 520.3

### SUPERSEDES

CS 520.3 Reviewing Health Insurance Orders, August 28, 2014

### REFERENCES

42 USC §§ 652(f) and 666(a) (19); 45 CFR §§ 303.31 and 303.32; MCA §§ 40-5-208 and 40-5-801 et seq.

### Introduction

Reference to this section provides policy and procedure for choosing the medical enforcement parent, and for conducting a review of health insurance orders. The CSSD is required by federal and state statute to establish and enforce health insurance obligations. In compliance, the CSSD reviews support orders for health insurance obligations and proper medical enforcement.

This section begins with a list of definitions relevant to CSSD medical enforcement. Following the definitions is table 1 Enforcement Parent Decision Matrix then table 2 Federal Modification and Enforcement Requirements for Health Insurance. Next are policy and procedures, which are followed by table 3 Third-Party Medical Enforcement. Table 3 is for use when there is more than one obligee and one of the obligees is a parent who is ordered to provide health insurance in a case.

Policy includes the following:

- Requirement for review
- Health insurance coverage and medical support
- Enforcement against the parent obligee
- Support orders with specified medical support amounts
- Medicaid reimbursement

Procedures are as follows:

- Identifying case requirements needed for medical support enforcement
- Identifying and fulfilling modification requirements
- Request for redirection of a medical support enforcement agreement
- The status of medical support enforcement relating to the enforcement parent
- Determining the availability of medical coverage outside of the CSSD enforcement parent
- Medical Support Dollar Amount

### Definitions

For purpose of this section the following definitions apply:

**Enforcement Parent:** The parent whose health insurance order the CSSD is enforcing or preparing to enforce.

**Employment Related Insurance:** The CSSD considers employment related insurance from Unions or TRICARE\* to be employment insurance. References to employer or employer insurance should be read to include the employer related insurances mentioned above. In cases where the enforcement parent refuses to obtain health insurance from either of these, the CSSD can enforce the insurance requirement through a contempt or medical penalty action (see procedures in CS 520.10 Enforcing Health Insurance Order—Penalty Actions). Hardship determinations for employment related insurance should be treated in the same manner as those for ordinary employer insurance.

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\*TRICARE, formerly known as the Civilian Health and Medical Program of the Uniformed Services (CHAMPUS), provides civilian health benefits for military personnel, military retirees, and their dependents. Included under the TRICARE name is several options such as TRICARE Standard, TRICARE Prime and TRICARE Reserve Select (TRS). In addition, dental is offered through the TRICARE Dental Program (TDP). Details on all the TRICARE options can be found on the [TRICARE website](#).

**Health Insurance Order:** Any court or administrative order that requires a parent to provide health insurance coverage for the children. An order that requires only that the parent pay medical expenses or health care costs for the children (or even an amount toward health insurance premiums) is not a health insurance order. An order that requires a parent to provide insurance through a particular employer--whether the employer is identified by name or by some other reference--is a health insurance order only if the parent is currently employed by that employer. In questionable circumstances, the caseworker should consult with regional legal staff to determine whether the language in the support order qualifies as a health insurance order.

**Verification of Coverage:** Insurance coverage is verified by contacting the employer, insurance company or the parent providing coverage to make sure the coverage on SEARCHS is still in force for a child.

**Informal Medical Review:** Use of electronic interfaces and other indicators to determine if the coverage on SEARCHS is likely to still be accurate.

**LRD:** Last Review Date

The Enforcement Parent Decision Matrix in Table 1, and Federal Modification and Enforcement Requirements for Health Insurance in Table 2 follow.

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**Enforcement Parent Decision Matrix**

Table 1

Step	Question and Outcomes	Action
1	<p><b>Are the children currently enrolled in HMK (CHIP)?</b></p> <p>Custodial Parent: YES Non-Custodial Parent: N/A</p>	Notice both parents, then <b>Stop</b>
2	<p><b>Is coverage currently in place for the children?</b></p> <p><i>The coverage must be attributable to the parent, must be geographically accessible, and must be in place now or scheduled by the plan administrator to take effect within 6 months from now upon completion of a waiting period.</i></p> <p>Custodial Parent: Yes Non-Custodial Parent: Yes</p> <hr/> <p>Custodial Parent: No Non-Custodial Parent: Yes</p> <hr/> <p>Custodial Parent: Yes Non-Custodial Parent: No</p> <hr/> <p>Custodial Parent: No Non-Custodial Parent: No</p>	<p><b>Go to Step 3</b></p> <hr/> <p><b>Enforce NCP</b></p> <hr/> <p><b>Enforce CP</b></p> <hr/> <p><b>Go to Step 3</b></p>
3	<p><b>Is there credit for insurance in the current guidelines?</b></p> <p><i>(Credit must be verifiable on a copy of the child support guidelines that accompanies the support order; for a "reverter" support order where the child support amount depends on whether the NCP is providing health insurance, the CSSD considers there is no credit in the guidelines.)</i></p> <p>Custodial Parent: YES Non-Custodial Parent: YES</p> <hr/> <p>Custodial Parent: NO Non-Custodial Parent: YES</p> <hr/> <p>Custodial Parent: YES Non-Custodial Parent: NO</p> <hr/> <p>Custodial Parent: NO Non-Custodial Parent: NO</p>	<p><b>Go to Step 4</b></p> <hr/> <p><b>Enforce NCP</b></p> <hr/> <p><b>Enforce CP</b></p> <hr/> <p><b>Go to Step 4</b></p>
4	<p><b>Is the parent currently employed?</b></p> <p><i>(Employment status is determined by the caseworker using information available on SEARCHS and in the case file.)</i></p> <p>Custodial Parent: Yes Non-Custodial Parent: Yes</p> <hr/> <p>Custodial Parent: No Non-Custodial Parent: Yes</p> <hr/> <p>Custodial Parent: Yes Non-Custodial Parent: No</p> <hr/> <p>Custodial Parent: No Non-Custodial Parent: No</p>	<p><b>Go to Step 4a</b></p> <hr/> <p><b>Enforce NCP</b></p> <hr/> <p><b>Enforce CP</b></p> <hr/> <p><b>STOP</b></p>

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<b>Step</b>	<b>Question and Outcomes</b>	<b>Action</b>
<b>4a</b>	<b>Is insurance available through the employer?</b>  <i>(Insurance is available if the employer offers dependent coverage to some or all of its employees, and the parent is eligible for the coverage.)</i>	
	Custodial Parent: Yes    Non-Custodial Parent: Yes	<b>Go to Step 4b</b>
	Custodial Parent: No    Non-Custodial Parent: Yes	<b>Enforce NCP</b>
	Custodial Parent: Yes    Non-Custodial Parent: No	<b>Enforce CP</b>
	Custodial Parent: No    Non-Custodial Parent: No	<b>STOP</b>
<b>4b</b>	<b>Is the parent's out-of-pocket cost \$0?</b>  <i>(The parent's out-of-pocket cost is \$0 if the employer pays the entire premium required for coverage of the children.)</i>	
	Custodial Parent: YES    Non-Custodial Parent: YES	<b>Enforce CP or both</b>
	Custodial Parent: NO    Non-Custodial Parent: YES	<b>Enforce NCP</b>
	Custodial Parent: YES    Non-Custodial Parent: NO	<b>Enforce CP</b>
	Custodial Parent: NO    Non-Custodial Parent: NO	<b>Go to Step 4c</b>
<b>4c</b>	<b>Is the parent's out-of-pocket cost reasonable?</b>  <i>(The parent's monthly out-of-pocket cost is the cost of coverage for the children-only that is not paid by the employer. If the parent must be enrolled to get coverage for the children, the cost does not include the cost of the parent's coverage.</i>  <i>If the cost of children-only coverage is not identified separately by the insurance plan, derive the amount by subtracting the cost of a parent-only package from the cost of the parent-child package. The out-of-pocket cost is reasonable if it does not exceed 5% of the parent's gross monthly income.)</i>	<b>("STOP" still requires the CSSD to identify and load any voluntary coverage and to review public assistance status quarterly.)</b>
	Custodial Parent: Yes    Non-Custodial Parent: Yes	<b>Go to Step 5</b>
	Custodial Parent: No    Non-Custodial Parent: Yes	<b>Enforce NCP</b>
	Custodial Parent: Yes    Non-Custodial Parent: No	<b>Enforce CP</b>
	Custodial Parent: No    Non-Custodial Parent: No	<b>STOP—begin again at Step 1 when a triggering event occurs</b>

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Step	Question and Outcomes	Action
<b>5</b>	<p><b>For which parent is the cost of employer insurance a smaller percentage of gross income? (Use this test only if employer insurance is available and reasonable to both parents.)</b></p> <p>a. CP monthly out-of-pocket cost for the children only:</p> <p>b. CP monthly gross income:</p> <p>c. CP percentage (line a divided by line b):</p> <p>d. NCP monthly out-of-pocket cost for the children only:</p> <p>e. NCP monthly gross income:</p> <p>f. NCP percentage (line d divided by line e):</p> <p>g. Custodial parent's percentage (line c) is smaller</p> <hr/> <p>h. Non-Custodial Parent's percentage (line f) is smaller</p>	<p style="text-align: center;"><b>Enforce CP</b></p> <hr/> <p style="text-align: center;"><b>Enforce NCP</b></p>

**FURTHER INSTRUCTIONS:** When an enforcement parent is identified by this process, leave the process, and enforce against that parent until employer coverage is obtained or enforcement fails. If enforcement fails, enforce against the other parent until coverage is obtained or enforcement fails.

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**Federal Modification and Enforcement Requirements for Health Insurance**

Table 2

**CASE FACTS**

**REQUIREMENTS**

Parent who is <b>ordered</b> to provide health insurance	Parent who <b>carries</b> health insurance	Parent who is <b>able</b> to provide health insurance	CSSD required to <b>modify</b> order	CSSD required to <b>enforce</b> insurance	Reference
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**Scenarios where CP is a parent**

1	NCP	CP	N/A	<i>Either: Yes/CP</i>	<i>Or: Yes/NCP</i>	PIQ,1 Q#20
2	NCP	NCP	N/A	No	Yes/NCP	USC <sup>2</sup>
3	NCP	Neither	N/A	No	Yes/NCP	USC
4	CP	Neither	CP is able (NCP N/A)	No	Yes/CP	PIQ, Q#21
5	CP	Neither	CP is not able	Yes/NCP <sup>3</sup>	(Yes/NCP after mod)	PIQ, Q#21
6	Neither	CP	N/A	Yes	(Yes/CP after mod., refer to Step 2 NOTE 1 in procedures.)	USC
7	Neither	NCP	N/A	Yes/NCP	(Yes/NCP after mod)	USC
8	Neither	Neither	N/A	Yes/NCP	(Yes/NCP after mod)	USC
9	Both	N/A	N/A	No	Yes/NCP <sup>4</sup>	USC
10	CP	CP	N/A	No	Yes/CP	PIQ, Q#21
11	CP	NCP	N/A	<i>Either: Yes/ NCP</i>	<i>Or: Yes CP</i>	USC; PIQ, Q#21

<sup>1</sup>Policy Interpretation Question PIQ-02-03, Medical Support Enforcement Policy Clarifications, issued December 20, 2002, by the federal Office of Child Support Enforcement.

<sup>2</sup>Medical support enforcement provisions of Title IV-D of the Social Security Act, at 42 USC § 652(f).

<sup>3</sup>Other CSSD policies concerning establishment or enforcement in temporarily unworkable cases may also apply.

<sup>4</sup>In the situation where both parents in the case are ordered to provide insurance, the CSSD Enforcement Parent Decision Matrix applies.

#### Policy

##### Requirement for Review

Federal law requires the CSSD to include medical support in all child support orders being enforced under Title IV-D of the Social Security Act, and to enforce medical support whenever health insurance is available at a reasonable cost. Montana law also requires establishment and enforcement of medical support orders that include health insurance obligations.

To comply with these laws the CSSD routinely reviews support orders for health insurance obligations and reviews cases with health insurance obligations for proper enforcement. Review occurs whenever a IV-D case is opened or re-opened, a support order is established or modified, a change occurs in the case that could affect medical support, or a pre-specified medical review date occurs. **The annual medical review may be conducted on an informal basis with no contact required described as in the procedural section below.**

##### Health Insurance Coverage and Medical Support

Generally, health insurance coverage is the vehicle by which the CSSD enforces medical support. While other provisions relating to medical services for the children may be included in the support order, it is the health insurance provision that is the subject of the review described above, and the basis for medical support enforcement of the case in CS 520.5 Medical Hardship Review through 520.10 Enforcing Health Insurance Orders— Penalty Actions. If the support order contains a health insurance provision, the CSSD refers to the provision as a health insurance order.

##### Enforcement Against the Parent Obligee

In cases where both the obligor and the parent obligee are ordered to provide health insurance, the CSSD may enforce the health insurance obligation of either parent. Factors that may be applied in identifying the appropriate enforcement parent include whether either parent is providing current coverage; whether either parent received credit for health insurance premiums in the guidelines calculation accompanying the support order; whether either parent is employed, and has insurance available through employment at a reasonable cost; and the percentage of each parent's gross income that would be taken up by the cost of reasonable insurance. Other factors apply in cases where some of the children live with a third-party obligee.

When the enforcement parent is identified, the CSSD takes action against that parent to obtain employer insurance. If all remedies fail, the CSSD turns to the other parent and again pursues coverage through all available remedies. If reasonable health insurance cannot be obtained through either parent, the CSSD monitors the case for any change that could affect medical support enforcement. If a change occurs, the CSSD applies the above-listed factors at that time and identifies the proper enforcement parent according to the new case facts.

When both parents are ordered to provide health insurance, it is **necessary only** to exhaust employer or employer related insurance for the enforcement parent. Once it has been exhausted you may choose to switch to the other obligated parent. The medical enforcement action for the other obligated parent should begin with that parent's employer.

#### Support Orders with Specified Medical Support Amounts

Infrequently a child support order includes a specified monthly amount for medical support in addition to the child support amount. The CSSD enforces the medical support amount in the same manner and at the same time as child support, but separate medical and child support accounts are required. The existence of the medical support dollar obligation may or may not relieve the CSSD of the need to establish a health insurance order in the case. In these situations, the caseworker should consult the regional legal unit for a determination based on the specific facts and language of the support order.

#### Medicaid Reimbursement

Most support orders entered by the CSSD on or after October 1, 1996, and before October 1, 1999, as well as some non-CSSD orders entered during that time, contain a requirement for the obligated parents to pay a "Medicaid reimbursement" amount to the state when the children are receiving Medicaid services and certain conditions apply. The CSSD enforced this requirement for applicable cases until October 1, 2000, when collection of Medicaid reimbursement accounts was discontinued by CSSD policy.

#### Procedures

##### Procedures for Caseworker

1. **Conducting a Medical Review.** Proceeds in this step for any case where the CSSD is required to enforce medical support.
  - a. Initiating the Medical Review. If any of the events in 1) through 4) occurs, reviews the case in Steps 2 through 8 below to determine whether a modification or enforcement action is required and identify the parent whose health insurance order should be enforced.
    - 1) The case is opened or re-opened, or current child support is established or modified.
    - 2) A new hire alert is received for the obligor.
    - 3) The medical review date arrives.
    - 4) Before the medical review date arrives a medical-related change occurs such as,
      - enforcement parent's employment
      - enforcement parent's income
      - enforcement parent's premium costs
      - child's geographic access to covered services
      - availability of employer/payor dependent coverage
      - status of any alternative coverage provided by the enforcement parent
  - b. Completing the Medical Review. When the review and any required action are completed verifies any existing coverage, updates the last review date on the SEARCHS MEC screen, and monitors for any change. The next review date for medical support enforcement is generally one year from the last review unless there is a case-specific reason for an earlier review.

In IST cases presumes the coverage is still in place unless notified otherwise. There is no need to ask the other state annually for an update regarding medical, however a case note is required that nothing has happened in the case that would indicate a change in coverage.



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#### PROCEDURAL NOTE:

**Steps 2 Identifying Case Requirements and 4 Identifying the Enforcement Parent apply for the purpose of determining the CSSD enforcement parent only. Once enforcement against the identified parent begins, the Steps cannot be reapplied except as indicated in Step 6 Reviewing Medical Support Enforcement, or in CS 520.5 Medical Hardship Review, 520.7 Enforcing Health Insurance Orders, or 520.10 Enforcing Health Insurance Orders—Penalty Actions.**

**2. Identifying Case Requirements.** If a previous review has already determined the enforcement parent in the case, skips to Step 6 for that parent. Otherwise, identify the participants, support orders, and known coverages in the case and proceeds as directed in 2a through 2c below.

- a. No Order for obligee. In a case where there is no parent obligee ordered to provide health insurance, proceeds against the obligor in CS 520.7, unless modification in Step 3 is required.

#### NOTE 1:

**When neither parent is ordered to provide insurance,** but the custodial parent maintains voluntary coverage, proceeds to Step 7 Coverage Outside CSSD Enforcement to process the coverage. The case must then be reviewed for possible modification of the order to include a medical insurance provision, or to establish a NOMS as in section CS 402.1, Notice and Order for Medical Support whichever process is appropriate given individual case specifics.

#### NOTE 2:

**Child in Two Cases.** If a child is in two cases--one against each parent--and both parents are required to provide health insurance, the CSSD enforces against both obligors. Each obligor is the enforcement parent in his or her case.

- b. Order for Parent Obligee--no other obligees in case In a case where there is a parent obligee who is ordered to provide health insurance, and no enforcement children are attached to any third-party obligee, and the obligor is also ordered to provide insurance, proceeds to Step 4 Identifying the Enforcement Parent to determine the appropriate enforcement parent, or the obligor is not ordered to provide insurance, proceeds against the parent obligee in CS 520.7, unless modification in Step 3 Identifying and Fulfilling Modification Requirements is required.
- c. Order for Parent Obligee--multiple obligees in case. In a case where there is a parent obligee that is ordered to provide health insurance and some or all of the enforcement children are living with a third-party obligee, proceeds to enforce support according to the Third-Party Rules listed in Table 3, unless modification in Step 3 is required. Begins enforcement at CS 520.7.

#### NOTE:

**Third-Party Rules Prevail.** For a case described in this sub Step (2c) the CSSD applies the Third-Party Rules rather than the procedures in Step 4 to determine the enforcement parent.

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**3. Identifying and Fulfilling Modification Requirements.** Consults Table 2 above for any requirement to modify health insurance in the case. If a modification of the support order is required, proceeds to Steps 3a through 3e below. **EXCEPTION:** Modification is not appropriate for a case in which the children will be emancipated within six months of initiation of the modification.

- a. If Montana has continuing exclusive jurisdiction over the support order, proceeds to Step 3c below.
- b. If another state has continuing exclusive jurisdiction over the support order proceeds in Step 7 for any voluntary coverage and takes no further action in this section until the appropriate tribunal modifies the support order to include health insurance.

**NOTE:**

**It is the responsibility of the state having continuing exclusive jurisdiction** to ensure that the order contains a provision for the health care coverage of the children.

- c. If a CSSD modification is required in Step 3a, sends the obligee a modification packet along with written notification that a modification of the support order is required for the purpose of establishing medical support, and that the obligee must complete and return the enclosed for CS 408.3A Request for Review form. If the obligee does not return the Request for Review, the CSSD may take appropriate action against the obligee's public assistance benefits or may proceed to close the obligee's non-public assistance case.

The written notification required above may be the standard CS 202.1A 10-day letter, custom language may be added to CS 408.3A Request for Review or any other letter. The caseworker should document the language.

**NOTE:**

**Obligor Applicant.** If the obligor was the applicant for CSSD services, actions in Steps 3c and 3d should be addressed to the obligor.

- d. Monitors for return of the completed Request for Review as in CS 408.3 Establishing a Support Obligation.
  - i. If the obligee does not timely return the Request for Review, initiates case closure or non-cooperation procedures, and take no further action in this section.
  - ii. If the obligee timely returns the Request for Review, completes the modification process according to the procedures in CS 408.3. Upon entry of the modification order or decision not to modify, proceeds as in Step 3e.
- e. Upon completion of the modification action in Step 3d proceeds below according to the outcome. **EXCEPTION:** If a parent obligee is ordered to provide health insurance, and some or all of the enforcement children are living with a third-party obligee, proceeds according to the Third-Party Rules in Table 3 below.
  - i. If both parents in the case are now ordered to provide health insurance, proceeds to Step 4 to identify the enforcement parent.
  - ii. If only one parent is ordered to provide insurance, proceeds to section CS 520.7 for that parent.

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- 4. Identifying the Enforcement Parent.** In cases where both the obligor and the parent obligee are ordered to provide health insurance for the children and a choice between parents is still available after steps 2 and 3 are applied, identifies the enforcement parent according to Table 1 above. Takes action as necessary to obtain any information required for a decision within the table. Proceeds to CS 520.7 for the parent chosen.

EXCEPTION: If a new-hire report is received before an enforcement parent can be identified, and the CSSD has previously issued and resolved an enrollment notice to the obligor in favor of enrollment, proceeds immediately to step 6 for the obligor as the enforcement parent; issues an Order to Enroll and proceeds as directed in CS 520.7.

- 5. Request for Redirection--Medical Enforcement Agreement.** Upon receiving a request from a parent for a change in the CSSD enforcement parent, proceeds in steps 5a through 5d below; document the determination and any subsequent changes on SEARCHS.
- a. Reviews the case to determine whether all of the following conditions apply; in questionable cases consults with the CSSD regional legal staff:
    - i. Both parents are ordered to provide health insurance for the children.
    - ii. The CSSD is currently enforcing or preparing to enforce against one of the parents through an OTE.
    - iii. The parents submit a written agreement to the CSSD clearly stating which parent should provide health insurance coverage, and the agreement is signed by the named parent.
    - iv. Enforceable coverage (via OTE) is currently available to the parent named in the agreement, or alternative coverage attributable to that parent is currently in place.
  - b. If all of the conditions in 5a are met, grants the request based on a medical enforcement agreement. Terminates any enforcement against the "old" enforcement parent and begins enforcement against the "new" enforcement parent in CS 520.7. Re-verify coverage whenever the case is reviewed for medical support in this section. (The parents may not apply to change the enforcement parent again, once the agreement is in place.)
  - c. If any of the conditions in 5a are not met, denies the request, and continues enforcement against the existing enforcement parent.
  - d. If coverage lapses after the agreement is in place and the CSSD cannot obtain replacement coverage from the enforcement parent by any available remedy, initiates enforcement against the other parent. (NOTE that a lapse in coverage that is not rectified has the effect of automatically canceling the agreement.)

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- 6. Reviewing Medical Support Enforcement.** Determines the status of medical support enforcement with respect to the CSSD enforcement parent and proceeds as applicable for that parent in steps 6a through 6d.
- a. **No Coverage or No Enforcement.** If no coverage is known, or if coverage is in place on a voluntary basis only, proceeds in 6a(i) through 6a(iv) below.
    - i. Determines whether all appropriate enforcement actions have been taken in CS 520.7 and if necessary, in CS 520.5 and CS 520.10. If further action is available, proceeds as directed. Actions may include:
      - Issuing and resolving an enrollment notice
      - Determining whether employer insurance is reasonable in cost
      - Issuing and obtaining coverage under an Order to Enroll
    - ii. Determines whether any previous barriers to employer coverage still exist; proceeds in 6a(i) if there has been a change.
    - iii. Reviews any existing medical hardship as in CS 520.5 and proceeds as directed.
    - iv. Prepares and sends to the parent form CS 520.3B Confirmation of Health Insurance Status, to identify or confirm coverage and employment. Monitors for a response within 10 working days and proceeds to step 6c. **OPTION FOR INFORMAL CONTACT:** In lieu of written confirmation the caseworker may obtain coverage and employment information by contacting the enforcement parent by telephone. The caseworker must obtain or confirm information in **all** the fields listed on the form.
  - b. **Enforcement with Coverage.** If coverage has been obtained as a result of a CSSD enforcement action confirmation of the coverage may be done through a Formal or an Informal Annual Review, and in some instances an annual verification of coverage is no longer required.
    - i. A Formal Review involves a triggering event. Triggering events occur in cases that make it necessary to do a full medical review pursuant to this policy section. A full medical review means sending a Confirmation of Health Insurance or a Payor's Statement is required. Examples of some triggering events are as follows:
      - New hire reports and other reported changes in employment status
      - Case opening or re-opening
      - Change of custodian
      - Support order establishment or modification
      - Notification by either parent or an employer that there has been a lapse or change in coverage
      - A change in the CP's public assistance status if the CP is the enforcement parent
      - A change in marital status if the insurance is provided through a current spouse
      - A CP change of address to another state when Indian Health Service (IHS) is the insurance

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- ii. An Informal Annual Review involves verification of coverage that must be done by accessing HMK via CHIMES EA, DER, MT BCBS, Federal BCBS, EBMS and Allegiance. Use of these resources is required and is done rather than sending a Confirmation of Health Insurance or Payor's Statement. Scenarios of when an Informal Annual Review may be used follow:

#### Scenario 1

If an OTE is in place and the insurance on MID is a result of that OTE, check to make sure that the parent is still working for the same employer. Use of electronic tools such as MISTICS, ESW, and HIR quarterly reports if working out of state are some examples. If the parent is the AP and money is still coming in from the same employer, the caseworker may use the recent payments on PAH as evidence that employment has not changed. Once satisfied that the parent is still with the same employer, make a case note and update LRD on MEC.

#### Scenario 2

If the insurance is from an employment source where an OTE is not possible such as military or union, check the parent's continued employment status using the same methods, electronic tools and interfaces listed above. For the military, quarterly wages will appear on HIR and DER should show the coverage. For union coverage, caseworkers should check to make sure that the parent is still employed by an employer in the specific trade associated with that union.

#### Scenarios 3 and 4

Case workers should check to make sure nothing has happened over the last year that would lead them to believe there had been a potential change to the medical insurance. They should look for any possible missed triggering events such as a CP who now has a case open against the spouse that had been providing insurance or a change in public assistance status. If no changes are apparent, document it in case notes and update the LRD on the MEC screen.

A case note documenting the findings of the informal review in all the scenarios listed above **is required** as is updating the Last Review Date on the MEC screen.

- iii. Annual Verification Not Required. In the instances below annual verification of coverage is no longer required. Enters a case note documenting findings and updating the LRD on the MED screen are **required**.
- In cases where insurance is provided based on an OTE in place with a parent's current employer, there is no need to verify the coverage annually unless we are notified that there has been a change of employer, a change of insurer or otherwise notified that the child is no longer covered.
  - In cases where coverage is provided through employment but an OTE is not possible, such as military or union, presume the child remains covered unless something indicates otherwise.

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- If a CP is providing other coverage for the child where there is no OTE, presume the child is still covered unless notified or until some other triggering event would lead us to believe the child may no longer be covered. An example of this may be coverage obtained through a spouse (stepparent) and then we learn of a subsequent divorce.

Note 1: If the AP is providing other coverage where there is no OTE such as spousal coverage or private insurance, the coverage information should be verified annually.

Note 2: In cases where the CP is the parent providing coverage and the CSSD receives a TANF or Medicaid referral for the CP, the caseworker should check CHIMES to see if the insurance information we have in SEARCHS is known in CHIMES. If not, then the insurance must be verified.

- c. Response to Confirmation Letter. If the parent timely responds to the confirmation letter in step 6a with the required information regarding coverage and employment (and IHS if applicable), verifies any new coverage listed on the response, updates SEARCHS and notifies the parent obligee as applicable (see procedures for processing coverage information in CS 520.7). Proceeds in 6a(i) as applicable for any new information received.

If the parent does not timely respond, contacts the parent or if applicable contacts the employer or insurance provider for the information. When contacting an insurance provider, you may be asked to provide the CSSD Federal ID number. If information cannot be obtained from any source, and the information is necessary to proceed against the parent (for example, if employment or unemployment cannot be determined), proceeds to CS 520.10 to initiate a medical penalty.

- d. Enforcement Remedies Exhausted If all possible remedies for obtaining health insurance are exhausted for the enforcement parent, proceeds in 6d(i) through 6d(iii) below as applicable.
  - i. If there is no other parent in the case, or if the other parent is not ordered to provide health insurance, monitor for a change in circumstances and takes no further action in this section. (NOTE that modification requirements in Step 3 may still apply.)
  - ii. If there are two parents with health insurance orders in the case and third-party rules do not apply, proceeds as follows:
    - A. If the CSSD has not pursued enforcement against the other parent since the determination in step 4, proceeds to enforce against that parent, beginning in step 6a.
    - B. If the CSSD has pursued enforcement against the other parent since the determination in step 4 and has exhausted all available remedies, monitors for a change in case facts that may affect the CSSD's ability to enforce health insurance. If a change occurs, returns to step 4; otherwise, takes no further action in this section.
  - iii. If there are two parents with health insurance orders in the case and third-party rules apply, proceeds against the other parent to the extent allowed in Table 3.

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**NOTE:**

**When both parents are ordered to provide.** When both parents are ordered to provide health insurance, it is **necessary only** to exhaust employer insurance for the enforcement parent. Once employer insurance for the enforcement parent has been exhausted you may switch to the other parent's employer. For any existing coverage (including private insurance) send CS 520.3B Confirmation of Health Insurance Status, update the last review date on the SEARCHS MEC screen and monitor for any change.

- 7. Coverage Outside CSSD Enforcement.** Determines from information available in the case file whether any person or entity other than the enforcement parent (for example, the other parent, the other parent's spouse, or an unordered parent) is providing geographically accessible health insurance coverage for the children. If so, processes the enrollment information according to applicable procedures in CS 520.7. For any coverage that may be unknown to the custodian of the covered child, notifies the custodian of the coverage in writing.

Proceeds in this step regardless of whether the enforcement parent is providing health insurance and regardless of whether either parent is ordered to provide health insurance.

EXCEPTION: In a case where the CSSD is no longer providing current support services, it is not necessary to load the coverage on SEARCHS. Any coverage that is loaded on the MID screen must be monitored and updated annually or ended.

**NOTE:**

**Importance of Other coverage Information.** The information described above may not be needed to proceed with health insurance enforcement in the case. However, it is important for determining the percentage of children covered and other aggregate data maintained by the CSSD and the federal government.

- 8. Medical Support Dollar Amount.** Regardless of whether the obligor provides or has been ordered to provide health insurance, if the support order specifies a sum-certain medical support amount payable by the obligor sets up an unassigned or assigned medical support account in the case.

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#### Third Party Rules

Table 3

This table applies in cases where there is more than one obligee, and one of the obligees is a parent who is ordered to provide health insurance for the children. Enforcement should proceed against the obligor unless the obligor is not ordered to provide health insurance.

<b>RULE 1</b>	<b>Attached children only.</b> The CSSD does not enforce against a parent obligee for children who are not living with the parent obligee.
<b>RULE 2</b>	<b>No mixed enforcement.</b> The CSSD does not enforce against two parents in the same case at the same time, except in temporary situations in RULE 3.
<b>RULE 3</b>	<b>All children vs. some children--existing coverage.</b> The CSSD will enforce existing coverage provided by the parent obligee (subject to RULE 1) only while pursuing coverage through the obligor for all the children, if enforcement through the obligor for all the children fails, -if the obligor is not ordered to provide health insurance, or has received a public assistance exception.
<b>RULE 4</b>	<b>All children vs. some children--no existing coverage.</b> If there is no existing coverage provided by the parent obligee, the CSSD will enforce first against the obligor; if that enforcement fails, or if the obligor is not ordered to provide health insurance or has received a public assistance exception, the CSSD will enforce against the parent obligee for the children living with the parent obligee.
<b>RULE 5</b>	<b>Correct case number on OTE.</b> If the third-party custodian opens a case against the parent obligee, the CSSD follows regular procedures to establish a financial obligation against that parent. As soon as the support order is entered, the CSSD will issue a new OTE to the parent's employer under the new case number. <b>NOTE:</b> <b>Financial Obligation.</b> While the financial obligation is being established, the CSSD can continue to enforce the parent's medical obligation under the existing OTE. However, if the parent changes employers prior to entry of a financial obligation against that parent, a new OTE is required under the new case number. Prior to completion of the SEARCHS NIS/NID and OTS/OTD screens, CSSD enters a medical record on SOS/SOD screens to issue an OTE under the new case number. The information from SOS/SOD screens under the existing case number is transferred to the new case number, except for the following: -The financial support obligation is entered as "0.00"; and -The MED INS field is entered as "A".