

137-055-4620

Enforcing Health Care Coverage and Cash Medical Support

(1) If services are being provided pursuant to ORS 25.080 and private health care coverage is ordered the administrator will issue a medical support notice to enforce orders for health care coverage within two business days of receiving information that an employer has hired or rehired a providing party, as defined in ORS 25.321, or at any time when the administrator determines it is necessary; and

(a) An obligor or obligee is ordered to provide appropriate health care coverage for a child as required by ORS 25.321, OAR 137-050-0750;

(b) The providing party has failed to provide appropriate health care coverage, either personally or through a spouse's or domestic partner's coverage; and

(c) The employer offers or may offer a health benefit plan to its employees.

(2) Notwithstanding the provisions of section (1), if the party ordered to provide appropriate health care coverage is an active duty or retired member of the military, the administrator will not issue a medical support notice to the military.

(3) If the conditions in section (2) apply:

(a) The administrator will inform the obligee, if the obligee is not the providing party, of the process to initiate military health care coverage enrollment for the dependent child; and

(b) If the medical child support rights for the dependent child are currently assigned to the state, the administrator will require either party to make all reasonable efforts to enroll the child in military health care coverage.

(4) When a medical support notice has been served and the providing party is not enrolled in a health benefit plan or is not enrolled in a plan that offers dependent coverage that is available pursuant to ORS 25.323, and if more than one plan is offered, the administrator will select a plan in accordance with OAR 137-055-4640.

(5) A party can contest the medical support notice as set out in ORS 25.333.

(6) When the administrator is notified that the amount to be withheld for premiums is greater than is permissible under ORS 25.331 the administrator will review the circumstances and, if appropriate, activate contingent medical support provisions, or move to modify the order to comply with the child support guidelines.

(7) When an employer notifies the administrator that the amount to be withheld for the health care coverage premium is greater than permissible under ORS 25.331:

(a) An obligee who is a recipient of TANF cash assistance may not elect to receive health care coverage over monetary child support. In these cases, the administrator will select monetary child support over health care coverage unless health care coverage would be in the best interests of the child.

(b)(A) Except as provided in section (7)(b)(B), an obligee, who is not a recipient of TANF cash

assistance and who selects health care coverage over monetary child support, may change the selection:

- (i) No more than once per year;
- (ii) In conjunction with a medical support notice being issued to a new employer; or
- (iii) When a child becomes seriously ill and health care coverage is needed.

(B) An obligee who is not a recipient of TANF cash assistance may not select health care coverage over monetary child support if such a selection conflicts with the requirements of any bankruptcy plan.

(8) A request to select health care coverage over monetary child support may be made verbally or in writing.

(9) When multiple cases for an obligor are being enforced and the employer receives notice that one or more cases have selected health care coverage over monetary child support, the employer must withhold in the following manner:

(a) First withhold the full amount listed on withholdings issued on the cases that have not selected health care coverage over monetary child support;

(b) Withhold the premium for health care coverage, up to the maximum allowed by law;

(c) If the maximum is not reached, withhold support for the case(s) requesting health care coverage, up to the full amount of the withholding order or the maximum allowed by law, whichever is less;

(d) Identify which payment goes with which case and submit the monetary support payments to the Division of Child Support as directed in the withholding orders.

(10) A providing party may select a different health benefit plan during any applicable open enrollment period, providing the health benefit plan provides appropriate health care coverage, or other coverage if the order so requires.

(11) If the providing party changes to a health benefit plan that does not meet the criteria in section (10) of this rule, the administrator will issue a medical support notice as provided in section (1) of this rule and may pursue modification of the support order for an amount towards cash medical support pursuant to OAR 137-050-0750, or activate contingent provisions, if any, as provided in section 12 of this rule.

(12) When an order provides for an obligor to pay cash medical support if the obligor is not providing private health care coverage, the following provisions apply:

(a) When the obligor stops providing private health care coverage, the administrator will notify the parties that coverage has stopped and that cash medical support provisions in the order, if any, will begin the month following the month in which the coverage stopped.

(b) When the obligor begins providing health care coverage, after notice from a party or other source, the administrator will notify the parties that coverage is now provided and that cash

medical support will stop effective the month after the child is enrolled or the administrator receives notice, whichever is later.

(c) At the obligor's option, the obligor may exceed the "reasonable in cost" cap in order to provide health insurance that is otherwise appropriate. If obligor does so, cash medical support will stop.

Stat. Auth.: ORS 25.080, 25.321, 25.325, 25.342, 180.345

Stats. Implemented: ORS 25.080, 25.321 – 25.341

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