**R527. Health and Human Services, Recovery Services.**

**R527-201. Medical Support Services.**

**R527-201-1. Authority and Purpose.**

(1) The Department of Health and Human Services may create rules necessary for social services pursuant to Section 26B-1-202. The Office of Recovery Services (ORS) may adopt, amend, and enforce rules pursuant to Section 26B-9-108.

(2) The purpose of this rule is to specify the responsibilities and procedures for ORS to provide Title IV-D medical support services pursuant to 45 CFR 303.30, 303.31 and 303.32 (2024).

**R527-201-2. Definitions.**

(1) "Accessible" is whether the health care coverage provided by a parent is reasonably available for the child's use. Insurance is considered accessible to the child if non-emergency services covered by the health insurance plan are available to the child within 90 minutes or 90 miles of the child's primary residence.

(2) "Cash Medical Support" is an obligation to provide financial support in lieu of or in addition to health insurance to provide for the medical needs of the child. Pursuant to Section 26B-9-201, cash medical support in Utah means an obligation to equally share all reasonable and necessary medical and dental expenses of children.

(3) "National Medical Support Notice" or "NMSN" is the federally approved form that ORS shall use to notify an employer to enroll children in an employment-related health insurance plan in accordance with a child support order.

**R527-201-3. Limitation of Services.**

ORS may not:

(1) pursue establishment of specific amounts for monthly medical support;

(2) initiate an action to obtain a judgment for uninsured medical expenses; or

(3) collect and disburse premium payments to insurance companies.

**R527-201-4. Conditions Under Which Non-IV-A Medicaid Recipients May Decline Support Services.**

ORS shall provide child and spousal support services; however, a non-IV-A Medicaid recipient may decline child and spousal support services if paternity is not an issue and there is an order for the non-custodial parent to provide medical support.

**R527-201-5. Securing a Medical Support Provision in the Support Order.**

(1) A notice to potentially obligated parents shall include a provision that an administrative or judicial proceeding will occur to:

(a) order either or both parents to purchase and maintain appropriate health care coverage; and

(b) order either or both parents to pay cash medical support.

(2) The notice shall be provided when the state either:

(a) initiates an action to establish a final support order or to adjust an existing child support order; or

(b) joins a divorce or modification action initiated by either the custodial or the non-custodial parent.

(3) If a judicial support order does not include a medical support provision, ORS shall begin judicial action to include a medical support provision.

**R527-201-6. Reasonable Cost of Insurance Premiums.**

(1) Employment-related or other health insurance coverage that does not exceed 5% of the parent's monthly gross income is generally considered reasonable in cost.

(2) An employer may not withhold more than the lesser of the amount allowed under the Consumer Credit Protection Act, the amount allowed by the state of the employee's principal place of employment, or the amount allowed for health insurance premiums by the child support order.

(3) If the combined child support and medical support obligations exceed the allowable deduction amount, the employer shall withhold according to the law, if any, of the state of the employee's principal place of employment requiring prioritization between child support and medical support.

(4) If the employee's principal place of employment is in Utah, the employer shall deduct current child support before deducting amounts for health insurance coverage.

(5) If the amount necessary to cover the health insurance premiums cannot be deducted due to prioritization or limitations on withholding, the employer shall notify ORS.

**R527-201-7. Insurance Credit.**

(1) If a parent is required to provide health care coverage for the minor children, and the order was issued by a Utah tribunal, the parent may receive a health insurance premium credit pursuant to Section 81-6-208.

(2) ORS will calculate and apply the insurance credit if ORS receives a completed Insurance Premium Credit Request letter. The completed Insurance Premium Credit Request must include the:

(a) availability of health insurance;

(b) policy number;

(c) names of each individual covered by the policy;

(d) the out-of-pocket cost for the health insurance;

(e) proof of the monthly health insurance premium paid;

(f) the obligated parent's signature; and

(g) the date the letter was completed.

(3) Credit will be given to the obligated parent beginning the first day of the month following the date ORS receives the completed Insurance Premium Credit Request letter.

(4) The health insurance credit will end on January 2 of each calendar year, in accordance with Subsection 81-6-208(10), unless the obligated parent provides verification of health insurance coverage and costs to ORS on an updated Insurance Premium Credit Request. To allow sufficient time for ORS to process the annual health insurance verification, the obligated parent may provide verification of the health insurance coverage as early as November 1 of the previous year.

**R527-201-8. Credit for Premium Payments and Effect of Changes to the Premium Amount Subsequent to the Order.**

(1) If the order or underlying worksheet does not mention a specific credit for health insurance premiums, ORS shall give credit for the child's portion of the health insurance premium when the obligated parent provides the necessary verification of health insurance coverage.

(2) ORS shall notify both parents in writing when the credit is changed.

**R527-201-9. Enforcement of Obligation to Maintain Health Insurance.**

(1) Appropriate steps shall be taken by ORS to ensure compliance with orders that require either parent or both parents to maintain health insurance. Parents shall demonstrate compliance by providing ORS with policy numbers and the health insurance provider name for the children for whom the medical support is ordered.

(2) If a parent has been ordered to maintain health insurance and health insurance is accessible and available at a reasonable cost, ORS shall use the NMSN to transfer notice of the health insurance provision to the parent's employer unless ORS is notified pursuant to Section 26B-9-225 that the children are already enrolled in a health insurance plan in accordance with the order.

(3) When appropriate, ORS shall send the NMSN to the parent's employer within two business days after employment information about the parent is entered in the State Directory of New Hires, has matched with ORS records, and been reported to ORS pursuant to Subsection 35A-7-105(2).

(4) The employer shall transfer the NMSN to the appropriate health insurance plan for which the children are eligible within 20 business days of the date of the NMSN if each of the following criteria are met:

(a) the parent is still employed by the employer;

(b) the employer maintains or contributes to plans providing family health insurance coverage;

(c) the parent is eligible for the health insurance coverage available through the employer; and

(d) state or federal withholding limitations, prioritization, or both, do not prevent withholding the amount required to obtain health insurance coverage.

(5) If more than one health insurance coverage option is available under a health insurance plan and the parent is not already enrolled, ORS in consultation with the custodial parent may select the least expensive option if the option complies with the child support order and benefits the children. The insurer shall enroll the children in the plan's default option or least expensive option in accordance with Subsection 26B-9-226(1)(b) unless another option is specified by ORS.

(6) The employer shall determine if the necessary employee contributions for the health insurance coverage are available. If the amounts necessary are available, the employer shall begin withholding when appropriate and remit directly to the plan.

(7) In accordance with Subsections 26B-9-225(2) and (3), the parent may contest withholding health insurance premiums based on a mistake of fact. The employer shall continue withholding under the NMSN until notified by ORS to terminate withholding health insurance premiums.

(8) If a parent successfully contests the action to enroll the children in a health insurance plan based on a mistake of fact, ORS shall notify the employer to discontinue enrollment and withholding health insurance premiums for the children.

(9) In accordance with Subsection 26B-9-306(9), the employer shall:

(a) notify ORS within five days after the parent terminates employment;

(b) provide ORS with the parent's last-known address; and

(c) provide the name and address of a new employer, if known.

(10) ORS shall promptly notify the employer when a current order for medical support is no longer in effect for which ORS is responsible.

**R527-201-10. Coordination of Health Insurance Benefits.**

If, at any point in time, a child is covered by the health insurance plans of both parents, the health insurance plan of the parent whose birthday occurs first in the calendar year, shall be designated as primary coverage for the child. The health insurance plan of the other parent shall be designated as secondary coverage for the child.

**KEY: child support, health insurance, Medicaid**

**Date of Last Change: October 21, 2024**

**Notice of Continuation: March 9, 2021**

**Authorizing, and Implemented or Interpreted Law: 26B-1-202; 26B-9-108; 26B-9-201; 26B-9-224; 26B-9-225; 26B-9-226; 26B-9-306; 35A-7-105; 81-6-208; 45 CFR 303.30; 45 CFR 303.31; 45 CFR 303.32**