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1	A bill to be entitled
2	An act relating to child support enforcement; amending s.
3	61.046, F.S.; defining the term "health insurance" for
4	purposes of provisions establishing and providing for
5	enforcement of medical support obligations in child-
6	support-enforcement cases; amending s. 61.13, F.S.;
7	establishing standards for a presumption of reasonable
8	costs of and accessibility of health insurance; requiring
9	that the court make a written finding before deviating
10	from the presumed reasonable cost; providing method for
11	calculating a child's health insurance and noncovered
12	medical expenses under certain circumstances; amending s.
13	61.1301, F.S.; conforming a provision to changes made by
14	the act; amending s. 409.2554, F.S.; defining the term
15	"health insurance" for purposes of provisions establishing
16	and providing for the enforcement of medical support
17	obligations in child-support-enforcement cases that
18	received services under the Social Security Act; amending
19	s. 409.2561, F.S.; conforming provisions to changes made
20	by the act; amending s. 409.2563, F.S.; conforming
21	provisions to changes made by the act; amending s.
22	409.2572, F.S.; conforming a cross-reference to changes
23	made by the act; amending s. 409.2576, F.S.; conforming
24	provisions to changes made by the act; providing an
25	effective date.
26	
27	Be It Enacted by the Legislature of the State of Florida:
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29	Section 1. Subsections (7) through (22) of section 61.046,
30	Florida Statutes, are renumbered as subsections (8) through
31	(23), respectively, and a new subsection (7) is added to that
32	section to read:
33	61.046 DefinitionsAs used in this chapter, the term:
34	(7) "Health insurance" means coverage under a fee-for-
35	service arrangement, health maintenance organization, or
36	preferred provider organization, and other types of coverage
37	available to either parent, under which medical services could
38	be provided to a dependent child.
39	Section 2. Paragraph (b) of subsection (1) of section
40	61.13, Florida Statutes, is amended to read:
41	61.13 Support of children; parenting and time-sharing;
42	powers of court
43	(1)
44	(b) Each order for support shall contain a provision for
45	health <u>insurance</u> care coverage for the minor child when <u>health</u>
46	insurance the coverage is reasonable in cost and accessible to
47	the child reasonably available. Health insurance is presumed to
48	be reasonable in cost if the incremental cost of adding health
49	insurance for the child or children does not exceed 5 percent of
50	the gross income, as defined in s. 61.30, of the parent
51	responsible for providing health insurance. Health insurance is
52	accessible to the child if the health insurance is available to
53	be used in the county of the child's primary residence or in
54	another county if the parent who has the most time under the
55	time-sharing plan agrees. If the time-sharing plan provides for
56	equal time-sharing, health insurance is accessible to the child
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57	if the health insurance is available to be used in either county
58	where the child resides or in another county if both parents
59	agree. Coverage is reasonably available if either the obligor or
60	obligee has access at a reasonable rate to a group health plan.
61	The court may require the obligor either to provide health
62	<u>insurance</u> care coverage or to reimburse the obligee for the cost
63	of health <u>insurance</u> care coverage for the minor child when
64	insurance coverage is provided by the obligee. The presumption
65	of reasonable cost may be rebutted by evidence of any of the
66	factors in s. 61.30(11)(a). The court may deviate from what is
67	presumed reasonable in cost only upon a written finding
68	explaining its determination why ordering or not ordering the
69	provision of health insurance or the reimbursement of the
70	obligee's cost for providing health insurance for the minor
71	child would be unjust or inappropriate. In any either event, the
72	court shall apportion the cost of <u>health insurance</u> coverage, and
73	any noncovered medical, dental, and prescription medication
74	expenses of the child, to both parties by adding the cost to the
75	basic obligation determined pursuant to s. 61.30(6). The court
76	may order that payment of <u>noncovered</u> uncovered medical, dental,
77	and prescription medication expenses of the minor child be made
78	directly to the obligee on a percentage basis. In a proceeding
79	for medical support only, each parent's share of the child's
80	health insurance and noncovered medical expenses shall equal the
81	parent's percentage share of the combined net income of the
82	parents. The percentage share shall be calculated by dividing
83	each parent's net monthly income by the combined monthly net
84	income of both parents. Net income is calculated as specified by
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85 s. 61.30(3) and (4).

1. In a non-Title IV-D case, a copy of the court order for health <u>insurance</u> care coverage shall be served on the obligor's union or employer by the obligee when the following conditions are met:

90 a. The obligor fails to provide written proof to the 91 obligee within 30 days after receiving effective notice of the 92 court order that the health <u>insurance</u> care coverage has been 93 obtained or that application for <u>health insurance</u> coverage has 94 been made;

95 b. The obligee serves written notice of intent to enforce 96 an order for health <u>insurance</u> care coverage on the obligor by 97 mail at the obligor's last known address; and

98 c. The obligor fails within 15 days after the mailing of 99 the notice to provide written proof to the obligee that the 100 health <u>insurance</u> care coverage existed as of the date of 101 mailing.

102 2.a. A support order enforced under Title IV-D of the 103 Social Security Act which requires that the obligor provide 104 health insurance care coverage is enforceable by the department 105 through the use of the national medical support notice, and an 106 amendment to the support order is not required. The department 107 shall transfer the national medical support notice to the 108 obligor's union or employer. The department shall notify the obligor in writing that the notice has been sent to the 109 110 obligor's union or employer, and the written notification must include the obligor's rights and duties under the national 111 medical support notice. The obligor may contest the withholding 112

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required by the national medical support notice based on a 113 114 mistake of fact. To contest the withholding, the obligor must 115 file a written notice of contest with the department within 15 116 business days after the date the obligor receives written 117 notification of the national medical support notice from the department. Filing with the department is complete when the 118 119 notice is received by the person designated by the department in the written notification. The notice of contest must be in the 120 121 form prescribed by the department. Upon the timely filing of a 122 notice of contest, the department shall, within 5 business days, 123 schedule an informal conference with the obligor to discuss the obligor's factual dispute. If the informal conference resolves 124 the dispute to the obligor's satisfaction or if the obligor 125 126 fails to attend the informal conference, the notice of contest is deemed withdrawn. If the informal conference does not resolve 127 128 the dispute, the obligor may request an administrative hearing 129 under chapter 120 within 5 business days after the termination 130 of the informal conference, in a form and manner prescribed by 131 the department. However, the filing of a notice of contest by the obligor does not delay the withholding of premium payments 132 133 by the union, employer, or health plan administrator. The union, 134 employer, or health plan administrator must implement the 135 withholding as directed by the national medical support notice 136 unless notified by the department that the national medical 137 support notice is terminated.

b. In a Title IV-D case, the department shall notify an
obligor's union or employer if the obligation to provide health
<u>insurance</u> care coverage through that union or employer is

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141 terminated.

In a non-Title IV-D case, upon receipt of the order 142 3. 143 pursuant to subparagraph 1., or upon application of the obligor 144 pursuant to the order, the union or employer shall enroll the 145 minor child as a beneficiary in the group health plan regardless of any restrictions on the enrollment period and withhold any 146 147 required premium from the obligor's income. If more than one plan is offered by the union or employer, the child shall be 148 149 enrolled in the group health plan in which the obligor is 150 enrolled.

151 4.a. Upon receipt of the national medical support notice 152 under subparagraph 2. in a Title IV-D case, the union or 153 employer shall transfer the notice to the appropriate group 154 health plan administrator within 20 business days after the date on the notice. The plan administrator must enroll the child as a 155 156 beneficiary in the group health plan regardless of any 157 restrictions on the enrollment period, and the union or employer 158 must withhold any required premium from the obligor's income 159 upon notification by the plan administrator that the child is 160 enrolled. The child shall be enrolled in the group health plan 161 in which the obligor is enrolled. If the group health plan in 162 which the obligor is enrolled is not available where the child 163 resides or if the obligor is not enrolled in group coverage, the 164 child shall be enrolled in the lowest cost group health plan 165 that is accessible to available where the child resides.

b. If health <u>insurance</u> care coverage or the obligor's employment is terminated in a Title IV-D case, the union or employer that is withholding premiums for health <u>insurance</u> care Page 6 of 12

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169 coverage under a national medical support notice must notify the 170 department within 20 days after the termination and provide the 171 obligor's last known address and the name and address of the 172 obligor's new employer, if known.

173 5.a. The amount withheld by a union or employer in 174 compliance with a support order may not exceed the amount 175 allowed under s. 303(b) of the Consumer Credit Protection Act, 176 15 U.S.C. s. 1673(b), as amended. The union or employer shall 177 withhold the maximum allowed by the Consumer Credit Protection 178 Act in the following order:

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(I) Current support, as ordered.

(II) Premium payments for health <u>insurance</u> care coverage,
 as ordered.

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(III) Past due support, as ordered.

183 (IV) Other medical support or <u>insurance</u> coverage, as 184 ordered.

185 If the combined amount to be withheld for current b. 186 support plus the premium payment for health insurance care 187 coverage exceed the amount allowed under the Consumer Credit Protection Act, and the health insurance care coverage cannot be 188 189 obtained unless the full amount of the premium is paid, the 190 union or employer may not withhold the premium payment. However, 191 the union or employer shall withhold the maximum allowed in the 192 following order:

193 (I) Current support, as ordered.

194 (II) Past due support, as ordered.

195 (III) Other medical support or <u>insurance</u> coverage, as 196 ordered.

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6. An employer, union, or plan administrator who does not comply with the requirements in sub-subparagraph 4.a. is subject to a civil penalty not to exceed \$250 for the first violation and \$500 for subsequent violations, plus attorney's fees and costs. The department may file a petition in circuit court to enforce the requirements of this subparagraph.

203 7. The department may adopt rules to administer the child 204 support enforcement provisions of this section that affect Title 205 IV-D cases.

206 Section 3. Subsection (5) of section 61.1301, Florida 207 Statutes, is amended to read:

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61.1301 Income deduction orders.--

209 By July 1, 2006, the department shall provide a payor (5) 210 with Internet access to income deduction and national medical 211 support notices issued by the department on or after July 1, 212 2006, concerning an obligor to whom the payor pays income. The 213 department shall provide a payor who requests Internet access 214 with a user code and password to allow the payor to receive 215 notices electronically and to download the information necessary 216 to begin income deduction and health insurance care coverage 217 enrollment. If a participating payor does not respond to 218 electronic notice by accessing the data posted by the department 219 within 48 hours, the department shall mail the income deduction 220 or medical support notice to the payor.

Section 4. Subsections (5) through (14) of section 409.2554, Florida Statutes, are renumbered as subsections (6) through (15), respectively, and a new subsection (5) is added to that section to read:

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409.2554 Definitions; ss. 409.2551-409.2598.--As used in ss. 409.2551-409.2598, the term: (5) "Health insurance" means coverage under a fee-forservice arrangement, health maintenance organization, or preferred provider organization, and other types of coverage available to either parent, under which medical services could

231 be provided to a dependent child.

232 Section 5. Paragraphs (b), (c), and (e) of subsection (5) 233 of section 409.2561, Florida Statutes, are amended to read:

409.2561 Support obligations when public assistance is paid; assignment of rights; subrogation; medical and health insurance information.--

(5) With respect to cases for which there is an assignmentin effect:

(b) When the obligor receives health insurance is obtained coverage for the dependent child, the IV-D agency shall provide health insurance policy information, including any information available about the health insurance policy which would permit a claim to be filed or, in the case of a health maintenance or preferred provider organization, service to be provided, to the state Medicaid agency.

(c) The state Medicaid agency, upon receipt of the health insurance coverage information from the IV-D agency, shall notify the obligor's insuring entity that the Medicaid agency must be notified within 30 days <u>after the health insurance</u> when such coverage is discontinued.

(e) Upon the state Medicaid agency receiving notice from
 the obligor's insuring entity that the <u>health insurance</u> coverage

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is discontinued due to cancellation or other means, the Medicaid agency shall notify the IV-D agency of such discontinuance and the effective date. When appropriate, the IV-D agency shall then take action to bring the obligor before the court for enforcement.

258 Section 6. Paragraph (e) of subsection (7) of section 259 409.2563, Florida Statutes, is amended to read:

260 409.2563 Administrative establishment of child support 261 obligations.--

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(7) ADMINISTRATIVE SUPPORT ORDER.--

(e) An administrative support order must comply with <u>ss.</u>
<u>61.13(1) and 61.30</u> s. 61.30. The department shall develop a
standard form or forms for administrative support orders. An
administrative support order must provide and state findings, if
applicable, concerning:

268 1. The full name and date of birth of the child or 269 children;

270 2. The name of the parent from whom support is being271 sought and the other parent or caretaker relative;

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3. The parent's duty and ability to provide support;

4. The amount of the parent's monthly support obligation;

5. Any obligation to pay retroactive support;

6. The parent's obligation to provide for the health care needs of each child, whether through <u>health</u> insurance coverage, contribution towards the cost of <u>health</u> insurance coverage, payment or reimbursement of health care expenses for the child, or any combination thereof;

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The beginning date of any required monthly payments and

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281	health <u>insurance</u> care coverage;
282	8. That all support payments ordered must be paid to the
283	Florida State Disbursement Unit as provided by s. 61.1824;
284	9. That the parents, or caretaker relative if applicable,
285	must file with the department when the administrative support
286	order is rendered, if they have not already done so, and update
287	as appropriate the information required pursuant to paragraph
288	(13) (b);
289	10. That both parents, or parent and caretaker relative if
290	applicable, are required to promptly notify the department of
291	any change in their mailing addresses pursuant to paragraph
292	(13)(c); and
293	11. That if the parent ordered to pay support receives
294	unemployment compensation benefits, the payor shall withhold,
295	and transmit to the department, 40 percent of the benefits for
296	payment of support, not to exceed the amount owed.
297	
298	An income deduction order as provided by s. 61.1301 must be
299	incorporated into the administrative support order or, if not
300	incorporated into the administrative support order, the
301	department or the Division of Administrative Hearings shall
302	render a separate income deduction order.
303	Section 7. Subsection (5) of section 409.2572, Florida
304	Statutes, is amended to read:
305	409.2572 Cooperation
306	(5) As used in this section only, the term "applicant for
307	or recipient of public assistance for a dependent child" refers
308	to such applicants and recipients of public assistance as
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309 defined in <u>s. 409.2554(8)</u> s. 409.2554(7), with the exception of 310 applicants for or recipients of Medicaid solely for the benefit 311 of a dependent child.

312 Section 8. Subsection (7) of section 409.2576, Florida 313 Statutes, is amended to read:

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409.2576 State Directory of New Hires.--

315 WAGE WITHHOLDING NOTICE AND NATIONAL MEDICAL SUPPORT (7)NOTICE. -- The department shall transmit a wage withholding notice 316 317 consistent with s. 61.1301 and, when appropriate, a national 318 medical support notice, as defined in s. 61.046, to the 319 employee's employer within 2 business days after entry of the 320 new hire information into the State Directory of New Hires' database, unless the court has determined that the employee's 321 322 wages are not subject to withholding or, for purposes of the 323 national medical support notice, the support order does not 324 contain a provision for the employee to provide health insurance 325 care coverage. The withholding notice shall direct the employer 326 to withhold income in accordance with the income deduction 327 order, and the national medical support notice shall direct the 328 employer to withhold premiums for health insurance care 329 coverage.

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Section 9. This act shall take effect upon becoming a law.