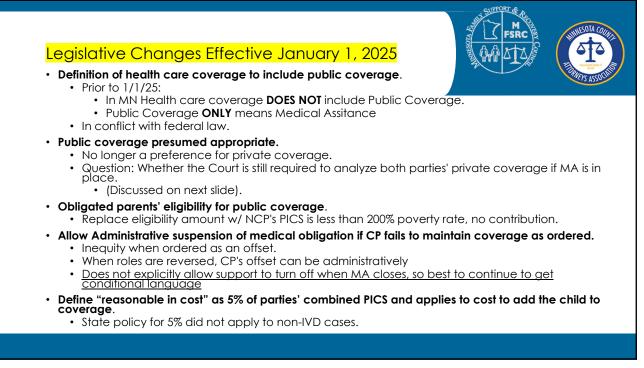


Minn. Stat. Sec. 518A.41

- Subd. 1: Definitions.
- Subd. 2: Order Requirements.
- Subd. 3: "Appropriate" Coverage.
- Subd. 4: Ordering Coverage.
- Subd. 5: UU Expenses.
- Subd. 6: Employer Notice.
- Subd. 7: Employer Requirements.
- Subd. 8: Health Plan Requirements.
- Subd. 9: Employer Liability.

- Subd. 10: Contesting Enrollment.
- Subd. 11: Changing Coverage.
- Subd. 12: Spousal Coverage.
- Subd. 13: Disclosure Requirements.
- Subd. 14: Enforcement Services.
- Subd. 15: Enforcement.
- Subd. 16: Offset.
- Subd. 17: Collecting UU Expenses.
- Subd. 18: Enforcing UU Expenses.





Do we collect private coverage information when MA is in place?



- Statute:
 Subd. 2(b)(2) Every order addressing child support must state: ... if a joint child is not presently enrolled in health care coverage, whether appropriate health care coverage for the joint child is available and, if so, state:
- Subd. 3. Public health care coverage is presumed appropriate.
- Subd. 4 (a) If a joint child is presently enrolled in health care eoverage, the court must order that the parent who currently has the joint child enrolled continue that enrollment unless the parties agree otherwise or a party requests a change in coverage and the court determines that other health care coverage is more appropriate.
- Subd. 4(a) If a joint child is presently enrolled in health care coverage, the court shall order that the parent who currently has the joint child enrolled in health care coverage continue that enrollment if the health care coverage is appropriate as defined under subdivision 3.
- Hope:
 Advise the agency if MA was in place, then we no longer need to include information on available appropriate coverage.

Reality:

- Unintentional result.
 Following the letter of the law: the agency needs to collect private healthcare information for the child support order.
- The statute explicitly requires the court to indicate whether appropriate coverage is available. (subd.2(b)(2)).
- The statute removed the section that only required the court to make appropriateness findings only when coverage was not already in place.
- Now, presumably a requirement of every order include whether appropriate coveage available, despite if MA or private coveage is already in place.

Possible Practice Suggestion:

- Possible interpretation:
 Not required to look at ALL available coverage.
- Court could find: yes, appropriate coverage is available (already in place as MA).
- Something to consider.



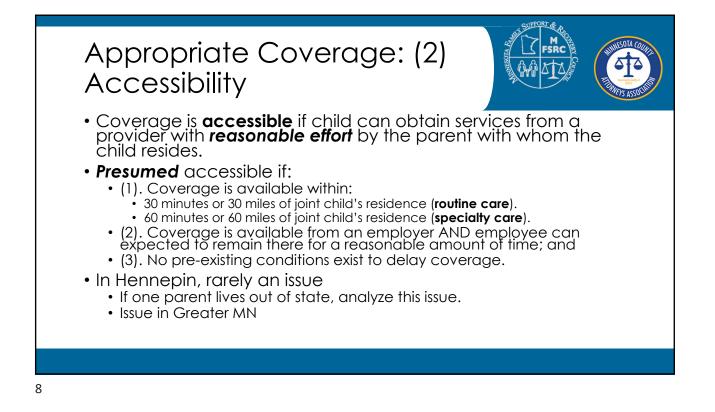
Appropriate Coverage: (1) Comprehensive

- **Presumed** comprehensive if at a **minimum** includes:
 - Preventative
 - Emergency
 - Acute/chronic care
- Minimum essential coverage: 26 U.S.C. § 5000A(f):
 - all government plans meet this standard.

• Reality:

- Parties are not providing enough information
- Unreasonable to provide contract

- If both parents have minimal comprehensive coverage, then consider which is **more** comprehensive by considering whether the plan includes:
 - Basic dental,
 - Orthodontia,
 - Eye glasses,
 - Contacts,
 - Etc.
- Best Practice:
 - Include 1-2 page summary of benefits sheet

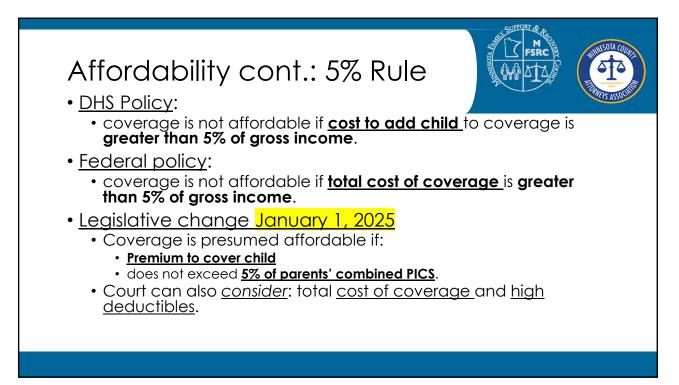


Appropriate Coverage: (4) Affordability

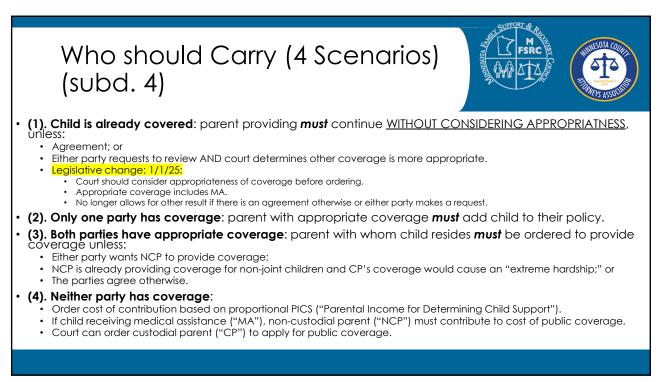
- Coverage is affordable if it is **reasonable** in cost.
- Prior to 1/1/25 "reasonable" is not defined.
- 5% Rule has been Policy(cont. on next slide)



- If both parents' coverage is equal regarding accessibility and comprehensiveness, then the least costly is presumed to be the most appropriate.
- When determining the least costly health care coverage the court may consider both:
 - the premium costs and
 - the cost of the health care coverage **deductibles**.



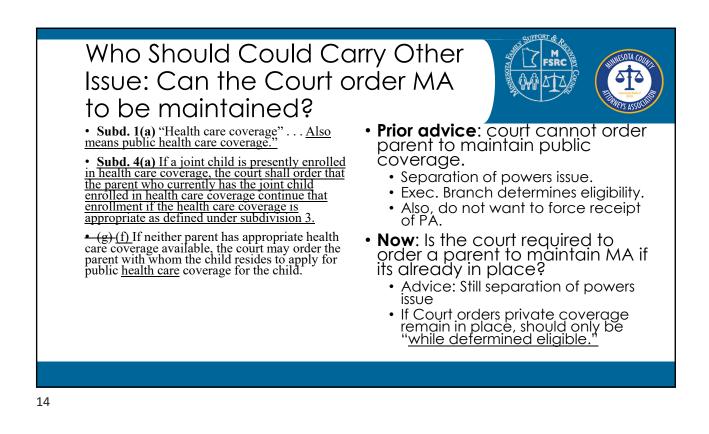
Affordability Cont. Statutory presumption possibly will lead to more coverage being considered affordable: On one hand: Considers combined PICS, rather than one parent's income. On the other: Court CAN consider total cost of coverage. Personal Request: Could the calculator include that calculation affordability of available coverage, since it based on PICS, not gross income? Now two calcs may have to be run, first to determine combined PICS, second to add cost of coverage. Question: What if a PICS' is based on potential income? Is that still fair? Something to consider.



Who Should Carry Cont.: Questions



- What if **both parents** already have the child enrolled? (double coverage).
 Statute is ambiguous, but no explicit prohibition against ordering both parents to
 - Court of appeals case makes clear cappot require parent
 - Court of appeals case makes clear cannot require parent to contribute to cost if also required to carry coverage, <u>Hennepin Cty. v. Peters</u>, No. C2-02-1921, 2003 WL 21448858, at *4 (Minn. Ct. App. June 24, 2003)
- Scenario where MA and Private coverage in place:
 - Technically support is assigned, but court should consider facts:
 - Is anyone paying out of pocket for premiums?
 - Is private coverage primary, and MA secondary?
 - Is MA covering the cost of private coverage?
 - Court can or cannot require party to carry coverage, or ask parent to make MA secondary
- What if parent complains that open enrollment already closed for the year?
 - Court order related to adding child requires that employer add the coverage.



Medical Support Contribution: sharing cost of coverage (for private coverage) (subd. 5) • First, determine **cost** to carry child's insurance: • The cost to add this child to coverage. Rather than total amount of the parent's insurance. Most of the time, insurers wont have cost for individual child and CSO will have to calculate the cost. • Example: Single: \$50 • Family: \$150 Child's cost: \$100 (\$150-\$50=\$100) • What if there is no additional cost? No contribution. Even if there is a cost difference in single and family, but coverage is already being expended for non-joint children and there is no additional cost to add the joint child. Second, determine each parent's share through PICS percentages. • Each parent is responsible for their proportionate share of cost of coverage. • Example: • CP: \$5,500/mo. NCP: gross income \$4,500/mo. Total PICS: \$10,000. • PICS percentage: CP: 55% and NCP: 45% (5,500/10,000=55% and 4,500/10,000=55%) Cost of insurance: \$100/mo. • CP responsible for \$55/mo. NCP responsible for \$45/mo. Support calculator makes this calculation

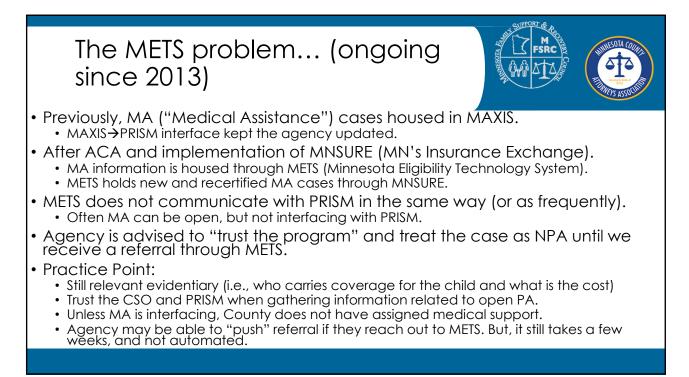


Is Medical Support Assigned to us: "Is the County Involved?" (256.741/518A.81)



• In General:

- County is involved in ANY case in which PA is open.
- Also can be involved where we are enforcing the order.
- "NPA application for services" (establishment, modification, paternity, enforcement)
- Determining whether Public Assistance is open for Medical Support:
 - ONLY Medical Assistance is considered PA for medical support.
 - Public coverage = "MEDICAL ASSISTANCE" 518A.41, subd. 1(f)
 - Open for the Joint Child(ren). Not for the mother.
 - Does NOT include:
 - Medicare
 - Federal subsidies
 - MNSure MNSure is an insurance exchange/marketplace. NOT a form of coverage.
 - Medicaid is the Federal program. MN calls it Medical Assistance.
 - Practice Point:
 - These terms are confusing, often you may need to ask follow up questions
 - to ensure "medical assistance is open for the joint child(ren).



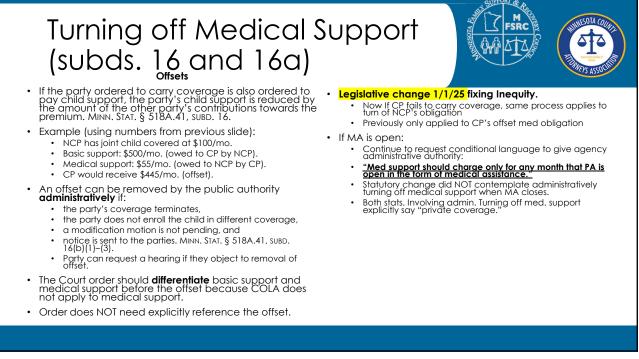
Medical Support Contribution: sharing cost of coverage (for public coverage) (subd. 5)



Assignment/Contribution to Medical Assistance:

- - If the joint child is on MA, support obligation goes to public assitance (not to the mother).
 - NCP's obligation determined by complicated calculation (Minnesota Statutes section 256L.15, subdivision 2(d))
 - NCP Pays what they'd pay if they applied themselves. Legislative change for 1/1/25: cut off for contribution is 200% of federal poverty rate.
- If NCP receives **"Public Assistance"** should not be ordered to pay medical support.
 - 518A.41 does not define PA, but
 - 256.741/518A.81, subd. 1 defines **PA to include MA**, **Child care, MFIP, and foster care funding** Calculator only takes into consideration whether NCP receives MA.

- Premium Scale 2021-2024:
 - \$0 if NCP qualifies for MA based on PICS
 - \$28/mo. per child. Max. 3 children
 - \$84/mo. MAX.
 - Hennepin Practice: if obligation is less than \$25, ask for a \$0: Cost of enforcing is not worth collecting.
- Practice Point:
 - Even after 1/1/25 law change, important to note that MS should charge "for any month that public coverage/medical assitance is open for the child."
 - Agency lacks administrative authority to turn off medical support when applied to MA.
- If MA and Private Coverage in place?
 - · Fact dependent on recommendation
 - Technically, support is assigned.
 - If private premium is expended, can order contribution to apply towards that cost. •
 - If MA is covering cost of private premium?



Medical Support Contribution: sharing cost of coverage (for public coverage) Cont.

- Ensure calculator is filled out correctly.
- Computation is different when PA v. Private.
- Make sure
 - Parent A is always NCP
 - Parent B is always CP.
- Calculator only asks if MA is open for Parent B, but statute references any PA.

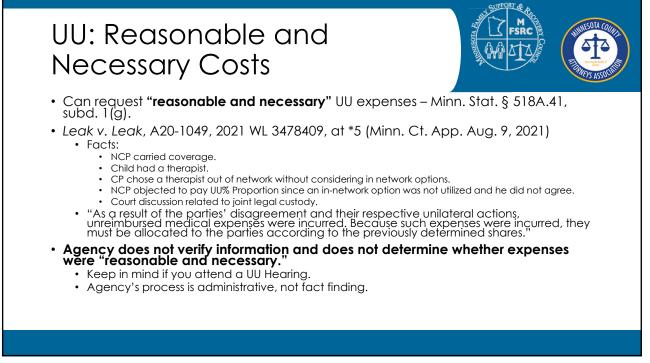
6. What is the <u>monthly income received?</u> 7. What is the <u>potential income</u> for each parent, if any? 8. What is the monthly amount the <u>joint children</u> receive in <u>banefits from 55</u> . 9. If the <u>joint children</u> receive Social Security or VA benefits, which parent is <u>transmettiked social amount sch parent</u> is ordered to pay for <u>social amount sch parent</u> is ordered to pay for <u>social amount sch parent</u> is ordered to pay for <u>social amount sch parent</u> is ordered to pay for <u>social amount sch parent</u> is ordered to pay for <u>social amount sch parent</u> is ordered to pay for <u>social amount sch parent</u> is ordered to pay for <u>social amount sch parent</u> is ordered to pay for <u>social amount sch parent</u> is ordered to pay for <u>social amount sch parent</u> is ordered to pay for <u>social amount sch parent</u> is ordered to pay for <u>social amount sch parent</u> is ordered to pay for <u>social amount sch parent</u> is ordered to pay for <u>social amount sch parent</u> (<u>social school amount sch parent school amount sch p</u>	s the Parent A Parent B suspect for \$ \$ and temporal parents for \$ and the parent B and the parent
inswer "no" for question 15c. 15a. Do you have court ordered equal parenting time?	○ Yes ● No
15b. What is the <u>annual number of overnights</u> awarded to each parent by the court? <u>Click to add a child</u> Go to the <u>Minnesota Child Support Parenting Time Calendar Tool</u> to calculat number of court-ordered overnights.	
15c. If you are unable to calculate the number of overnights awarded to eacl parent, do you have a current child support order with a parenting expense adjustment?	h ○Yes ●No
16. Number of joint child(ren) receiving child care?	
17. How much are the total monthly child care costs?	
18. Which parent incurs the <u>child care costs</u> ?	No Child Care Costs 🗸
19. Does either parent receive <u>child care assistance</u> for the joint children? No Child Care Costs 🗸	
20. Does Parent B receive Medical Assistance for the joint child(ren)? 21. Does Parent A receive Medical Assistance?	O Yes ● No O Yes ● No

21

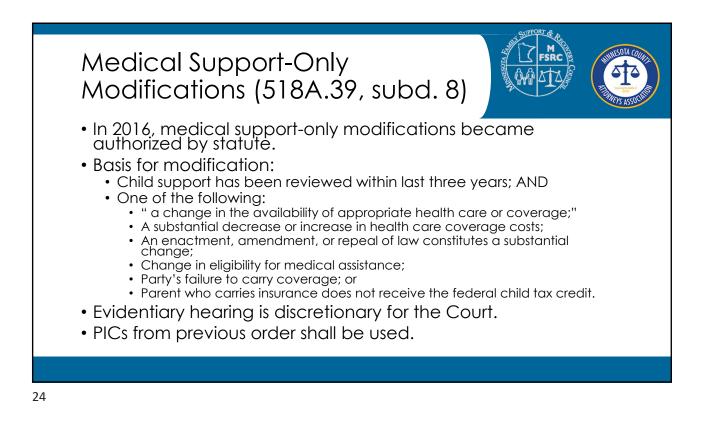
Uninsured/Unreimbursed Expense Reimbursements ("UU Expenses") (subd. 17 and 18)



- Process by which EITHER parent is able to submit expenses to the agency for UU Reimbursement from other parent.
- Must be a "**reasonable** and **necessary** medical or dental expense" (cont. on next page)
- Statutorily prescribed UNLESS parties have an agreement otherwise: language of the order controls.
- Each parent's contribution to UU expenses is based on PICS Percentage.
 - Example (based on previous slide's numbers):
 - UU Split: 45%/55%).
 \$200 in out of pocket prescription
 - \$200 in out of pocket prescription glasses. CP contribution: \$110.
 - NCP contribution: \$90.
- Must be brought within two years of date the expense was incurred.
- Notice must be provided other parent and they have 30 days to:
 - pay in full, enter a payment agreement, or
 - file a motion to contest.
- Can be either **added or deducted** from arrears.
- Repaid at 20% (like all arrears)
- All enforcement remedies are available to agency in collection of UU expenses.





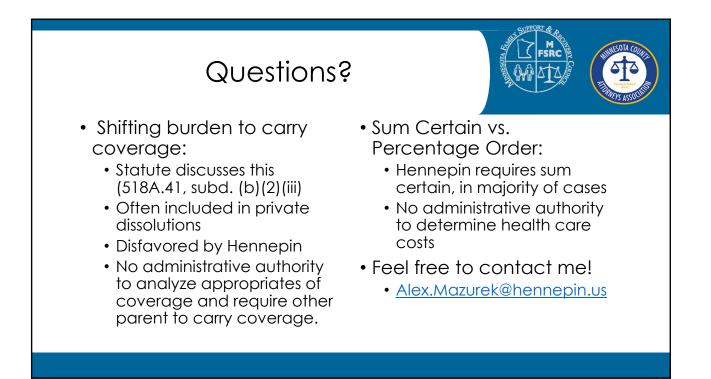


Medical Support Orders (subd. 4)

• Findings

- Does either parent have private coverage:
 - In place
 - Available
- Does either parent have MA in place
 For themselves and or joint children
- Does NCP have other PA in place
- Is the coverage:
 - Affordable
 - Accessible
 - Comprehensive
 - Special needs of the child
- Who will be required to cover child
- What is the cost of coverage: sum certain.





- Agreements
- Order:
 - Who carries coverage (unless MA, then court can only order a parent to APPLY)
 - Example: "Beginning April 1, 2016, Mother shall obtain and maintain private health coverage for the joint children, as long as available through her employer."
 - What is the contribution to medical support
 - Example: "Beginning April 1, 2016, Father shall pay \$48 per month for medical support."
 - If MA: additional conditional language is needed: "...ONLY FOR ANY MONTH MA IS OPEN."
 - If this langauge is not included, medical support will still charge when MA is closed.
 - 1/1/25: Do NOT need to include
 Agency authority to turn off med support when private is in place