

Cash Medical Support

A GUIDE TO ADDRESSING FREQUENTLY ASKED QUESTIONS

THERE ARE TWO TYPES OF MEDICAL SUPPORT

Medical support includes private health insurance and cash medical support. If private health insurance is NOT available to a child, the non-residential parent may be ordered to pay CASH MEDICAL support until such time as reasonable insurance becomes available.

WHY IS THERE A NEED FOR CASH MEDICAL SUPPORT?

Beginning July 21, 2008 federal and state laws require that child support guidelines consider not only health insurance that may be available to either or both parents, but also how the parents will meet the child's health care needs when no insurance is available, or when the cost of insurance is beyond the reasonable means of the parent(s) or where the cost is extraordinary or not reimbursable by insurance.

HOW WILL I KNOW WHEN AN OBLIGATION FOR CASH MEDICAL SUPPORT IS IN EFFECT?

If an order for private health insurance is in effect and coverage is being provided by the parent ordered to provide coverage for the child pursuant to this order, no cash medical support will be required. However, in the event the person(s) required to provide the health insurance loses coverage, the Non-Residential Parent's obligation to begin paying Cash Medical Support will begin on the first day of the month following the date which coverage was terminated/lost. A NOTICE REGARDING CASH MEDICAL SUPPORT (JFS04031) WILL BE

ISSUED TO THE PARTIES ADVISING OF THE CHANGE IN THE INSURANCE COVERAGE/AVAILABILITY.

This notice provides an opportunity to request a Medical Support Mistake of Fact Hearing. A request for hearing must be received within 7 business days of the date provided on the letter.

WHO RECEIVES THE CASH MEDICAL SUPPORT?

Non residential parents pay cash medical support to residential parents unless the child receives Medicaid. Then, the cash medical support is paid to the state of Ohio to defray the cost of Medicaid expenditures.



IMPORTANT THINGS TO REMEMBER

If Private Health Insurance is NOT available to either parent when the support order is issued or modified, both parents will be required to notify the CSEA when private health insurance DOES become available.

If private health insurance stops (for example; a change in employment), the non-custodial parent must pay cash medical support UNTIL private health insurance is again provided for the child.

When the CSEA becomes aware of changes that effect a parent's obligation to either pay cash medical support or provide health insurance, the CSEA will notify both parents.

Cash Medical Support may be assigned (paid) to the State of Ohio when the child is receiving Medicaid benefits. When the child is NOT receiving Medicaid benefits, the cash medical support is paid to the family.



DETERMINATION OF REASONABLE COST FOR HEALTH INSURANCE COVERAGE

The mother, the father, or both parents can be ordered to provide private health insurance—but only if it is reasonable in cost and is accessible.

Private health insurance is considered reasonable in cost if the annual cost (family coverage minus self-only coverage) does NOT exceed 5% of that parent's gross income.

Private health insurance is accessible if primary care services are available within thirty miles of the child's home.

Fully subsidized coverage through Ohio Medicaid (*including Healthy Start*) does **NOT** meet the requirements to provide private health insurance. Cash Medical Support is only paid when private

health insurance is not provided. Cash Medical Support is only ordered to be paid by the non-residential parent **AND** only if their gross income exceeds 150% of the federal poverty level for an individual. (*150% of the Federal Poverty Level for an individual in 2009/2010 is \$16,245 per year*).



IF I AM ORDERED TO PROVIDE HEALTH INSURANCE, CAN I PROVIDE THIS COVERAGE THROUGH MY SPOUSE?

As long as the Administrative or Court order allows for alternate

coverage, a spouse can provide health insurance for the child of the order

and this will suffice as valid insurance.

WHAT IF THE COST OF MY HEALTH INSURANCE HAS CHANGED AND IS NO LONGER CONSIDERED REASONABLE OR MY INCOME HAS BEEN REDUCED?

When determining reasonableness of insurance, the CSEA is required to consider the cost of the insurance based on the last Guideline Worksheet

used to establish or modify the support order. If the cost of health insurance has changed, either party may request a Review & Adjustment of the support order to

determine whether the cost is no longer reasonable. If so, the order will be adjusted accordingly.

MY ORDER CONTAINS A PROVISION FOR CASH MEDICAL SUPPORT AS WELL AS CHILD SUPPORT. I WANT TO WAIVE CHILD SUPPORT, CAN I ALSO WAIVE CASH MEDICAL SUPPORT?

Although a court has equitable jurisdiction to decide these matters notwithstanding the statute, it does not appear to have been intended that a court would deviate from (or waive) the cash medical

support obligation. The cash medical support obligation is ordered to be paid based on whether the obligation is reasonable in light of the income of the Non-Residential parent. The deviation statute is

specific that the child support obligation can be the subject of a deviation, the statute does not however mention the deviation of a cash medical support obligation.

What is the purpose of the Ohio CSEA Directors' Association or OCDA?

- To establish a unified, local voice for the improvement of Ohio's Child Support program, a small group of child support directors founded the Ohio Child Support Enforcement Agency (CSEA) Directors' Association (OCDA) in 1990. Through advocacy, legislation, policy development, partnerships, communication, and information sharing, OCDA serves as a vehicle to promote and strengthen the child support enforcement system. The values identified by OCDA members are integrity, accountability, collaboration, teamwork and strengthening Ohio's families.

OCDA Mission Statement

- OCDA is a professional association dedicated to strengthening Ohio's Child Support program.