OBTAINING PAYMENT FOR UNREIMBURSED MEDICAL EXPENSES

Parties must follow all insurance company rules. All medical expenses must be submitted to all available insurance plans. If a claim is denied by the insurance company for failure to follow any of their rules, the other party is not responsible for payment of any portion of the medical expense.

Documentation of unreimbursed medical expenses must be submitted to the other party no later than March 31st of the year following the calendar year in which the medical expense was received by the party seeking reimbursement.

Documentation must be provided showing that the first \$250 per person/per calendar year deductible has been met. During the first calendar year that the support order is in effect, the deductible is prorated. For example, if the support order becomes effective in July, the prorated deductible is \$125 per person through December.

The party with the medical expenses must send copies of the bills, insurance statements, and medical expenses form to the other party by certified mail (this should be completed quarterly). The party should keep the certified mail receipt as proof. The exact amount that is owed and to who it is owed must be clearly stated. The medical expenses form is available online or at the Domestic Relations Section. The party responsible for paying the unreimbursed medical expenses must remit payment directly to the other party within 30 days after receipt.

ENFORCEMENT OF MEDICAL SUPPORT

If the party fails to pay the unreimbursed medical expenses to the other party within 30 days, the party seeking reimbursement shall notify the Domestic Relations Section by sending the following:

- Copy of the certified mail receipt or certificate of mailing
- Copies of the medical expenses
- Insurance company statements
- Completed medical expenses form
- Confirmation that the \$250 per person/per calendar year deductible was met

If the support order requires a party to provide health insurance coverage and the party fails to do so, the party may be held in contempt of court. Parties must contact the Domestic Relations Section when there are any changes in health insurance coverage.

The Domestic Relations Section can only enforce collection of unreimbursed medical expenses if all instructions are followed and submission requirements are met.

MEDICAL SUPPORT



Court of Common Pleas of Lehigh County Domestic Relations Section 455 W. Hamilton Street, Room 320 Allentown, PA 18101 610-782-3185 Fax: 610-782-3725

> Email: cslehigh@pacses.com www.lccpa.org/drs

MEDICAL SUPPORT

All support orders require medical support. This includes health insurance coverage and unreimbursed medical expenses for the children and/or spouse.

Medical expenses are necessary medical services and supplies in excess of \$250 annually per person who is owed a duty of support, and includes:

- Copayments and deductibles
- Prescriptions
- Surgical procedures
- Dental and Orthodontia procedures
- Optical and Ophthalmology services

Unless specifically ordered by the court, medical expenses do **not** include:

- Chiropractic services
- Cosmetic procedures
- Psychiatric or psychological services

ESTABLISHING MEDICAL SUPPORT

When a support order is entered, one or both parties will be court-ordered to provide health insurance coverage for the child(ren) and/or spouse. The cost of the premium is allocated between the parties in proportion to their net incomes, and is reflected in the amount of the support order.

Eligible unreimbursed medical expenses are addressed in the support order by ordering each party to be responsible for a percentage of the expenses in proportion to their net incomes.

HEALTH INSURANCE COVERAGE

The non-custodial parent is initially responsible for providing health insurance coverage for the child(ren) if it is available at a reasonable cost through an employer or other group basis (23 Pa. C.S.A. 4326).

Generally, health insurance coverage is considered reasonable if the costs is less than 5% of the party's net income.

Medical assistance (ACCESS, Mercy) or other state-funded health insurance coverage through the Department of Human Services is not considered health insurance coverage for child support purposes; therefore, the non-custodial parent may be ordered to provide other health insurance coverage.

If you do not have health insurance coverage available for your child(ren), the **Children's Health Insurance Program (CHIP)** is offered through the state to "Cover All Kids". This is available for children up to age 19 at no cost, low cost, or at the state's costs depending on the household income of the family. To be eligible for CHIP, children must:

- be a Pennsylvania resident
- not be eligible for medical assistance or other health insurance coverage
- not have been covered by health insurance coverage in the past 6 months (some exceptions)
- meet citizenship requirement

For more information, call 1-800-986-KIDS or visit <u>www.chipcoverspakids.com.</u>

COMMUNICATION AND COOPERATION

Communication and cooperation between both parties is essential. Parties must provide each other with the following:

- Insurance card(s) and/or name of health care provider and identification numbers
- Copies of any claim forms
- Address to mail claim forms
- Benefit booklet or health insurance coverage contract
- Any other documentation needed to use health insurance coverage