

# NATIONAL MEDICAL SUPPORT NOTICE (NMSN)

## Fact Sheet

California Department of Child Support Services

By law, every order for child support must include a health insurance provision. If an employee or independent contractor is a noncustodial parent and eligible for health insurance, his/her children must be enrolled in the employer's health insurance plan whenever the noncustodial parent is ordered to provide health insurance coverage. Health insurance must be provided to the employee's children even if the employee declines his/her own personal health coverage.

Medical support orders may be for a specific dollar amount included on the IWO or as an order to provide health insurance that employers are noticed via a document titled: The National Medical Support Notice (NMSN) (form OMB 0970-0222). The NMSN is a standardized federal form that all state IV-D child support programs must use. The NMSN may accompany an IWO or it may be sent separately.

## EMPLOYER CHECKLIST FOR CHILD SUPPORT HEALTH INSURANCE.

- When an employee is ordered to pay health insurance as part of court ordered child support, the employer is sent a document called the National Medical Support Notice (NMSN). It will have the employee's name, child support case number and other information. It also has a section for the employer to complete.
- Within 20 business days of the date on the NMSN, the employer should check number 1 of the NMSN Employer Response (Part A) and return it by mail to the issuing party shown on the NMSN. If health insurance is not available to the employee, the employer is still required to respond to the issuing party by returning the Employer Response regardless of whether you provide group health benefits or the employee named herein is no longer employed by your organization.
- If your company does offer health insurance to employees, then you have 10 days from the date you receive an NMSN to confirm that the employee named in the NMSN is your employee and provide him/her with a copy of the notice and the information on the employee's right to request a hearing regarding the health insurance assignment.
- Within 20 business days of receipt of the NMSN, forward instructions to enroll to the designated health insurance company or other health plan insurer.
- Once enrollment is verified with the effective date, complete the NMSN's Health Insurance Information Form and return it to the issuing local child support county office.
- Within 40 business days of the receipt of the NMSN, or sooner if reasonable, furnish the local county office with a description of the coverage available and the effective date of the coverage, including, if not already provided, a summary plan description and any forms, documents, or information necessary to effectuate such coverage, as well as information necessary to submit claims for benefits.
- If health insurance coverage terminates for any reason, a notice of lapse of health insurance coverage should be forwarded to the issuing party.

## FOR ADDITIONAL INFORMATION:

Visit the California Child Support- A Guide for Business Handbook.

Any eligibility questions can be answered through NMSN guidelines:

<http://www.acf.hhs.gov/programs/css/resource/national-medical-support-notice-form>

Or contact the issuing local child support agency at 1.866.901.3212.

