



Rules of
Department of Social Services
Division 40—Family Support Division
Chapter 112—Child Support Program, Medical Support

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**Title 13—DEPARTMENT OF
SOCIAL SERVICES**

**Division 40—Family Support Division
Chapter 112—Child Support Program,
Medical Support**

13 CSR 40-112.010 Establishing or Modifying to Include Medical Support Obligations

PURPOSE: This rule sets forth the Family Support Division's procedures for establishing medical support obligations or modifying existing orders to include medical support obligations in accordance with sections 454.600 and 454.603, RSMo.

(1) For purposes of this rule, the following terms will be defined as:

(A) "Gross Income" means the amount of money earned prior to tax deductions and other mandatory or voluntary deductions;

(B) "Parent Seeking Support" means the person or state agency that will be entitled to receive support after the entry of a support order;

(C) "Parent Not Seeking Support" means the person who will be obligated to pay support after the entry of a support order;

(D) "Private Health Benefit Plan" means any benefit plan or combination of plans, other than public assistance programs, providing medical or dental care or benefits through insurance or otherwise, including, but not limited to, health service corporations, as defined in section 354.010, RSMo; prepaid dental plans, as defined in section 354.700, RSMo; health maintenance organization plans, as defined in section 354.400, RSMo; and self-insurance plans, to the extent allowed by federal law; and

(E) "Public Health Benefit Plan" means any benefit plan or combination of plans, providing medical or dental care that is funded under Title XIX or Title XXI of the Social Security Act.

(2) A health benefit plan through an employer or union will be considered reasonable if the cost of dependent coverage does not increase the current premiums of the parent who is to provide such coverage by more than five percent (5%) of that parent's gross income. In applying the five percent (5%) standard for the cost of health benefit plan coverage, the cost will be the difference between self-only coverage and family coverage, or the cost of adding the dependent(s) to existing coverage, whichever is applicable given the individual's available plan options. If the child(ren) is already covered by private health benefit plan coverage, the five percent

(5%) standard does not apply.

(3) A private health benefit plan is accessible if the plan does not limit coverage to a specific geographical area; or the plan limits coverage to a geographical area and the child(ren) reside(s) within that geographical area.

(4) The parent seeking support and the parent not seeking support will cooperate with the division by providing necessary information to determine if health benefit plan coverage through an employer or union is reasonable and accessible. The parent seeking support and the parent not seeking support must provide information within thirty (30) days of the date of the request from the division. If only one (1) parent provides information, then the division will use the information provided by that parent or information from other sources.

(5) When establishing or modifying a medical support obligation, the division will—

(A) Determine if the parent not seeking support has the child(ren) covered by a private health benefit plan, and if so, the division will order that parent to provide health benefit plan coverage;

(B) If the parent not seeking support does not have the child(ren) covered by a private health benefit plan, the division will determine if the parent seeking support has the child(ren) covered under a private health benefit plan. If the parent seeking support does have the child(ren) covered and wants to maintain such coverage, the division will order that parent to provide health benefit plan coverage;

(C) If neither parent maintains private health benefit plan coverage for the child(ren), the division will determine if the parent not seeking support has private health benefit plan coverage available at a reasonable cost. If the parent not seeking support has private health benefit plan coverage available at a reasonable cost that is accessible to the child(ren), the division will order that parent to provide health benefit plan coverage;

(D) If the parent not seeking support does not have private health benefit plan coverage available at reasonable cost, the division will determine if the parent seeking support has private health benefit plan coverage at a reasonable cost. If the parent seeking support has private health benefit plan coverage available at a reasonable cost that is accessible to the child(ren), the division will order that parent to provide health benefit plan coverage;

(E) If neither parent has private health benefit plan coverage available at a reasonable cost that is accessible to the child(ren) and the parent seeking support has the child(ren) on public health benefit plan coverage, the division will order the parent not seeking support to pay a percentage of uncovered costs of the child(ren)'s necessary medical care. The percentage will be determined by using that parent's percentage as set forth in line 4 of the Form 14 calculated by the division or if the division does not calculate a Form 14 then the division will order fifty percent (50%). If the parent not seeking support does not pay the percentage of the reasonable costs of the child(ren)'s necessary medical care as ordered, and a court has entered a sum-certain judgment regarding the amount the parent owes for the child(ren)'s necessary medical care, the division will collect the judgment amount; and

(F) If neither parent has private health benefit plan coverage available at a reasonable cost that is accessible to the child(ren) and the child(ren) are not enrolled in public health benefit plan, the division will order the parent not seeking support to pay a percentage of reasonable costs of the child(ren)'s necessary medical care. The percentage will be determined by using that parent's percentage as set forth in line 4 of the Form 14 calculated by the division or if the division does not calculate a Form 14 then the division will order fifty percent (50%). If the parent not seeking support does not pay the percentage of the reasonable costs of the child(ren)'s necessary medical care as ordered, and a court has entered a sum-certain judgment regarding the amount the parent owes for the child(ren)'s necessary medical care, the division will collect the judgment amount.

AUTHORITY: sections 207.022, 454.400, and 660.017, RSMo 2016. Original rule filed Feb. 7, 2020, effective Aug. 30, 2020.*

**Original authority: 207.022, RSMo 2014; 454.400, RSMo 1982, amended 1985, 1986, 1990, 1993, 1995, 1997, 2014; and 660.017, RSMo 1993, amended 1995.*