1-1 By: Uresti S.B. No. 774 1-2 1-3

(In the Senate - Filed February 22, 2013; February 26, 2013, read first time and referred to Committee on Jurisprudence; April 4, 2013, reported favorably by the following vote: Yeas 5,

Nays 0; April 4, 2013, sent to printer.)

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1-6 COMMITTEE VOTE

1-7		Yea	Nay	Absent	PNV
1-8	West	X			
1-9	Rodriguez	X			
1-10	Campbell			X	
1-11	Carona	X			
1-12	Garcia	X			
1-13	Hancock	Χ			
1-14	Paxton			X	

A BILL TO BE ENTITLED AN ACT

1-17 1-18 relating to requiring dental support for a child subject to a child support order.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

SECTION 1. Subsection (e), Section 54.06, Family Code, is amended to read as follows:

(e) The court shall apply the child support guidelines under Subchapter C, Chapter 154, in an order requiring the payment of child support under this section. The court shall also require in an order to pay child support under this section that health insurance and dental insurance be provided for the child. Subchapter D, Chapter 154, applies to an order requiring health insurance and dental insurance for a child under this section.

SECTION 2. Section 101.006, Family Code, is amended to read as follows:

Sec. 101.006. CHILD SUPPORT SERVICES. "Child support services" means administrative or court actions to:

(1) establish paternity;

(2) establish, modify, or enforce child support, [ex] medical support, or dental support obligations;

(3) locate absent parents; or

cooperate with other states in these actions and any other action authorized or required under Part D of Title IV of the federal Social Security Act (42 U.S.C. Section 651 et seq.) or Chapter 231.

SECTION 3. Chapter 101, Family Code, is amended by adding Sections 101.0094 and 101.0095 to read as follows:

Sec. 101.0094. DENTAL INSURANCE. "Dental insurance" means insurance coverage that provides preventive dental care and other dental services, including usual dentist services, office visits, examinations, X-rays, and emergency services, that may be provided through a single service health maintenance organization or other private or public organization.

Sec. 101.0095. DENTAL SUPPORT. "Dental support" periodic payments or a lump-sum payment made under an order to cover dental expenses, including dental insurance coverage, incurred for the benefit of a child.
SECTION 4. Sect

Section 101.012, Family Code, is amended to read as follows:

"Employer" means Sec. 101.012. EMPLOYER. corporation, partnership, workers' compensation insurance carrier, governmental entity, the United States, or any other entity that pays or owes earnings to an individual. The term includes, for the purposes of enrolling dependents in a group health or dental insurance plan, a union, trade association, or other similar organization.

Subsection (b), Section 101.024, Family Code, is SECTION 5. amended to read as follows:

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(b) For purposes of establishing, determining the terms of, modifying, or enforcing an order, a reference in this title to a parent includes a person ordered to pay child support under Section 154.001(a-1) or to provide medical support or dental support for a child.

SECTION 6. Section 101.034, Family Code, is amended to read as follows:

TITLE IV-D CASE. "Title IV-D case" means an Sec. 101.034. action in which services are provided by the Title IV-D agency under Part D, Title IV, of the federal Social Security Act (42 U.S.C. Section 651 et seq.), relating to the location of an absent parent, determination of parentage, or establishment, modification, or enforcement of a child support, [ex] medical support, or dental support obligation.

SECTION 7. Section 153.611, Family Code, is amended to read as follows:

Sec. 153.611. EXCEPTION FOR CERTAIN TITLE IV-D PROCEEDINGS. Notwithstanding any other provision of this subchapter, this subchapter does not apply to a proceeding in a Title IV-D case relating to the determination of parentage or establishment, modification, or enforcement of a child support, [ex] medical support, or dental support obligation.
SECTION 8. Section 154.008, Family Code, is amended to read

SECTION 8. as follows:

Sec. 154.008. PROVISION FOR MEDICAL SUPPORT AND DENTAL SUPPORT. The court shall order medical support and dental support for the child as provided by Subchapters B and D.

SECTION 9. Subsection (c), Section 154.015, Family Code, is amended to read as follows:

- For purposes of this section, the court of continuing (c) jurisdiction shall determine the amount of the unpaid child support obligation for each child of the deceased obligor. In determining the amount of the unpaid child support obligation, the court shall consider all relevant factors, including:
- (1) the present value of the total amount of monthly periodic child support payments that would become due between the month in which the obligor dies and the month in which the child turns 18 years of age, based on the amount of the periodic monthly child support payments under the child support order in effect on the date of the obligor's death;
- (2) the present value of the total amount of health insurance and dental insurance premiums payable for the benefit of the child from the month in which the obligor dies until the month in which the child turns 18 years of age, based on the cost of health insurance and dental insurance for the child ordered to be paid on the date of the obligor's death;
- (3) in the case of a disabled child under 18 years of age or an adult disabled child, an amount to be determined by the court under Section 154.306;
- (4) the nature and amount of any benefit to which the child would be entitled as a result of the obligor's death, including life insurance proceeds, annuity payments, distributions, social security death benefits, and ret trust and retirement survivor benefits; and
- (5) any other financial resource available for the support of the child.

SECTION 10. Subsection (b), Section 154.016, Family Code, is amended to read as follows:

- (b) In determining the nature and extent of the obligation to provide for the support of the child in the event of the death of the obligor, the court shall consider all relevant factors, including:
- (1)the present value of the total amount of monthly periodic child support payments from the date the child support order is rendered until the month in which the child turns 18 years of age, based on the amount of the periodic monthly child support payment under the child support order;

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 (2) the present value of the total amount of health insurance and dental insurance premiums payable for the benefit of the child from the date the child from the child from the date the child from the date the child from the child from the date the child from the date the child from the child from the date the child from the date the child support order is rendered until the month in which the child turns 18 years of age, based on the cost of health insurance and dental insurance for the child ordered to be paid; and
- in the case of a disabled child under 18 years of age or an adult disabled child, an amount to be determined by the court under Section 154.306.

SECTION 11. Subsections (d) and (e), Section 154.062, Family Code, are amended to read as follows:

- The court shall deduct the following items from (b) resources to determine the net resources available for child support:
 - (1)
- social security taxes; federal income tax based on the tax rate for a (2) single person claiming one personal exemption and the standard deduction;
 - (3)state income tax;
 - (4)union dues;

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- expenses for the cost of health insurance, dental (5) insurance, or cash medical support for the obligor's child ordered by the court under Sections [Section] 154.182 and 154.1825; and
- if the obligor does not pay social security taxes, (6) nondiscretionary retirement plan contributions.
- (e) In calculating the amount of the deduction for health care $\underline{\text{or dental}}$ coverage for a child under Subsection (d)(5), if the obligor has other minor dependents covered under the same health or dental insurance plan, the court shall divide the total cost to the obligor for the insurance by the total number of minor dependents, including the child, covered under the plan.

SECTION 12. Section 154.064, Family Code, is amended to read as follows:

Sec. 154.064. MEDICAL SUPPORT AND DENTAL SUPPORT FOR CHILD PRESUMPTIVELY PROVIDED BY OBLIGOR. The guidelines for support of a child are based on the assumption that the court will order the obligor to provide medical support and dental support for the child in addition to the amount of child support calculated in accordance with those guidelines.

SECTION 13. The heading to Subchapter D, Chapter 154, Family Code, is amended to read as follows:

SUBCHAPTER D. MEDICAL SUPPORT AND DENTAL SUPPORT FOR CHILD

SECTION 14. Subchapter D, Chapter 154, Family Code, amended by adding Section 154.1815 to read as follows:

- Sec. 154.1815. DENTAL SUPPORT ORDER. (a) In this section, "reasonable cost" means the cost of a dental insurance premium that does not exceed 1.5 percent of the obligor's annual resources, as described by Section 154.062(b), if the obligor is responsible under a dental support order for the cost of dental insurance coverage for only one child. If the obligor is responsible under a dental support order for the cost of dental insurance coverage for more than one child, "reasonable cost" means the total cost of dental insurance coverage for all children for which the obligor is responsible under a dental support order that does not exceed 1.5 percent of the obligor's annual resources, as described by Section 154.062(b).
- (b) In a suit affecting the parent-child relationship or in a proceeding under Chapter 159, the court shall render an order for the dental support of the child as provided by this section and Section 154.1825. (c) Before
- a hearing on temporary orders, or a final order if no hearing on temporary orders is held, the court shall require the parties to the proceedings to disclose in a pleading or other document whether the child is covered by dental insurance and, if the child is covered, the identity of the insurer providing the coverage, the policy number, which parent is responsible for payment of any insurance premium for the coverage, whether the coverage is provided through a parent's employment, and the cost of the premium. If dental insurance is not in effect for the child,

 $$\rm S.B.\ No.\ 774$ the parties must disclose to the court whether either parent has 4-1 access to dental insurance at a reasonable cost to the obligor.

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(d) In rendering temporary orders, the court shall, except for good cause shown, order that any dental insurance coverage in effect for the child continue in effect pending the rendition of a final order, except that the court may not require the continuation of any dental insurance that is not available to the parent at a reasonable cost to the obligor. If dental insurance coverage is not in effect for the child or if the insurance in effect is not available at a reasonable cost to the obligor, the court shall, except for good cause shown, order dental insurance coverage for the child as provided by Section 154.1825.

On rendering a final order the court shall:

(1) make specific findings with respect to the manner in which dental insurance coverage is to be provided for the child, with the priorities identified under Section in accordance 154.1825; and

except for good cause shown or on agreement of the parties, require the parent ordered to provide dental insurance coverage for the child as provided by Section 154.1825 to produce evidence to the court's satisfaction that the parent has applied for or secured dental insurance or has otherwise taken necessary action to provide for dental insurance coverage for the child, ordered by the court.

SECTION 15. Subchapter D, Chapter 154, Family Code, amended by adding Section 154.1825 to read as follows: is

Sec. 154.1825. DENTAL CARE COVERAGE FOR CHILD. (a) In this section:

(1) "Accessibility" means the extent to which dental insurance coverage for a child provides for the availability of dental care within a reasonable traveling distance and time from (1) the child's primary residence, as determined by the court.

(2) "Reasonable cost" has the meaning assigned Section 154.1815(a).

(b) The court shall consider the cost, accessibility, and quality of dental insurance coverage available to the parties and shall give priority to dental insurance coverage available through the employment of one of the parties if the coverage is available at a reasonable cost to the obligor.

In determining the manner in which dental care coverage (c) for the child is to be ordered, the court shall render its order in accordance with the following priorities, unless a party shows good cause why a particular order is not in the best interest of the child:

(1) if dental insurance is available for the child parent's employment or membership in a union, trade through association, or other organization at reasonable cost, the court shall order that parent to include the child in the parent's dental insurance; or

if dental insurance is not available for the child under Subdivision (1) but is available to a parent from another source and at a reasonable cost, the court may order that parent to provide dental insurance for the child.

(d) If the parent ordered to provide dental insurance under Subsection (c)(1) or (2) is the obligee, the court shall order the obligor to pay the obligee, as additional child support, an amount equal to the actual cost of dental insurance for the child, but not to exceed a reasonable cost to the obligor. In calculating the actual cost of dental insurance for the child, if the obligee has other minor dependents covered under the same dental insurance plan, the court shall divide the total cost to the obligee for the insurance by the total number of minor dependents, including the child covered under the plan.

(e) If the court finds that neither parent has access to private dental insurance at a reasonable cost to the obligor, the court shall order the parent awarded the exclusive right to designate the child's primary residence or, to the extent permitted by law, the other parent to apply immediately on behalf of the child for participation in any government medical assistance program or health plan that provides dental coverage.

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SECTION 16. Section 154.183, Family Code, is amended to read as follows:

Sec. 154.183. MEDICAL AND DENTAL SUPPORT ADDITIONAL SUPPORT DUTY OF OBLIGOR. (a) An amount that an obligor is ordered to pay as medical support or dental support for the child under this chapter, including the costs of health insurance coverage or cash medical support under Section 154.182 and the costs of dental insurance under Section 154.1825:

- (1) is in addition to the amount that the obligor is required to pay for child support under the guidelines for child support;
 - is a child support obligation; and
- (3) (3) may be enforced by any means available for the enforcement of child support, including withholding from earnings under Chapter 158.
- If the court finds and states in the child support order (b) that the obligee will maintain health insurance coverage, dental insurance coverage, or both, for the child at the obligee's expense, the court shall increase the amount of child support to be paid by the obligor in an amount not exceeding the actual cost to the obligee for maintaining the [health insurance] coverage, as provided under <u>Sections</u> [Section] 154.182(b-1) and 154.1825(d).
- As additional child support, the court shall allocate (c)
- between the parties, according to their circumstances:
 (1) the reasonable and necessary health care expenses, including vision and dental expenses, of the child that are not reimbursed by health or dental insurance or are not otherwise covered by the amount of cash medical support ordered under Section $154.182 [\overline{154.182(b)(3)}];$ and
- (2) amounts paid by either party as deductibles or copayments in obtaining health care or dental care services for the child covered under a health insurance or dental insurance policy.

SECTION 17. Subsections (a) and (b), Section Family Code, are amended to read as follows:

Receipt of a medical support order requiring that health (a) insurance be provided for a child or a dental support order requiring that dental insurance be provided for a child shall be considered a change in the family circumstances of the employee or member, for health insurance purposes and dental purposes, equivalent to the birth or adoption of a child. insurance

(b) If the employee or member is eligible for dependent health coverage or dependent dental coverage, the employer shall automatically enroll the child for the first 31 days after the receipt of the order or notice of the medical support order or the dental support order under Section 154.186 on the same terms and conditions as apply to any other dependent child.

SECTION 18. Section 154.185, Family Code, is amended to read as follows:

Sec. 154.185. PARENT TO FURNISH INFORMATION. (a) The court shall order a parent providing health insurance $\underline{\text{or dental}}$ insurance to furnish to either the obligee, obligor, or child support agency the following information not later than the 30th day after the date the notice of rendition of the order is received:

- (1)the social security number of the parent;
- (2)the name and address of the parent's employer;

with regard to health insurance: (3)

- (A) whether the employer is self-insured or has health insurance available;
- (B) $[\frac{(4)}{1}]$ proof that health insurance has been provided for the child;
- (C) [(5)] if the employer has health insurance available, the name of the health insurance carrier, the number of the policy, a copy of the policy and schedule of benefits, a health insurance membership card, claim forms, and any other information necessary to submit a claim; and
- 5-66 5-67 (D) [(6)] if the employer is self-insured, a copy of the schedule of benefits, a membership card, claim forms, and any 5-68 other information necessary to submit a claim; and 5-69

(4) with regard to dental insurance:

(A) whether the employer is self-insured or has dental insurance available;

(B) proof that dental insurance has been provided

for the child;

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6-63 6-64 6-65 (C) if the employer has dental insurance available, the name of the dental insurance carrier, the number of the policy, a copy of the policy and schedule of benefits, a dental insurance membership card, claim forms, and any other information necessary to submit a claim; and

(D) if the employer is self-insured, a copy of the schedule of benefits, a membership card, claim forms, and any

other information necessary to submit a claim.

(b) The court shall also order a parent providing health insurance or dental insurance to furnish the obligor, obligee, or child support agency with additional information regarding the health insurance coverage or dental insurance coverage not later than the 15th day after the date the information is received by the parent.

SECTION 19. The heading to Section 154.186, Family Code, is amended to read as follows:

Sec. 154.186. NOTICE TO EMPLOYER CONCERNING MEDICAL SUPPORT OR DENTAL SUPPORT.

SECTION 20. Subsection (a), Section 154.186, Family Code, is amended to read as follows:

(a) The obligee, obligor, or a child support agency of this state or another state may send to the employer a copy of the order requiring an employee to provide health insurance coverage or dental insurance coverage for a child or may include notice of the medical support order or dental support order in an order or writ of withholding sent to the employer in accordance with Chapter 158.

SECTION 21. Subsections (a), (b), (c), (d), (e), and (g),

Section 154.187, Family Code, are amended to read as follows:

- directing that health insurance coverage or dental insurance coverage be provided to a child of an employee or member is binding on a current or subsequent employer on receipt without regard to the date the order was rendered. If the employee or member is eligible for dependent health coverage or dental coverage for the child, the employer shall immediately enroll the child in a health insurance plan or dental insurance plan regardless of whether the employee is enrolled in the plan. If dependent coverage is not available to the employee or member through the employer's health insurance plan or dental insurance plan or enrollment cannot be made permanent or if the employer is not responsible or otherwise liable for providing such coverage, the employer shall provide notice to the sender in accordance with Subsection (c).
- (b) If additional premiums are incurred as a result of adding the child to the health insurance plan or the dental insurance plan, the employer shall deduct the health insurance premium or the dental insurance premium from the earnings of the employee in accordance with Chapter 158 and apply the amount withheld to payment of the insurance premium.
- (c) An employer who has received an order or notice under this subchapter shall provide to the sender, by first class mail not later than the 40th day after the date the employer receives the order or notice, a statement that the child:
- (1) has been enrolled in the employer's health insurance plan or dental insurance plan, or is already enrolled in another health insurance plan or dental insurance plan in accordance with a previous child support, [or] medical support, or dental support order to which the employee is subject; or
- (2) cannot be enrolled or cannot be enrolled permanently in the employer's health insurance plan or dental insurance plan and provide the reason why coverage or permanent coverage cannot be provided.
- 6-66 coverage cannot be provided.
 6-67 (d) If the employee ceases employment or if the health
 6-68 insurance coverage or dental insurance coverage lapses, the
 6-69 employer shall provide to the sender, by first class mail not later

than the 15th day after the date of the termination of employment or the lapse of the coverage, notice of the termination or lapse and of the availability of any conversion privileges.

(e) On request, the employer shall release to the sender information concerning the available health insurance coverage or dental insurance coverage, including the name of the health insurance carrier or dental insurance carrier, the policy number, a copy of the policy and schedule of benefits, a health insurance or dental insurance membership card, and claim forms.

An employer who fails to enroll a child, fails to or remit premiums or cash medical support, or withhold discriminates in hiring or employment on the basis of a medical support order or notice or a dental support order or notice under this subchapter shall be subject to the penalties and fines in Subchapter C, Chapter 158.

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SECTION 22. Section 154.188, Family Code, is amended to read as follows:

Sec. 154.188. FAILURE TO PROVIDE OR PAY FOR REQUIRED HEALTH INSURANCE OR DENTAL INSURANCE. A parent ordered to provide health insurance or dental insurance or to pay the other parent additional child support for the cost of health insurance or dental insurance who fails to do so is liable for:

(1) necessary medical expenses or dental expenses of the child, without regard to whether the expenses would have been

paid if health insurance or dental insurance had been provided; and
(2) the cost of health insurance premiums, dental insurance premiums, or contributions, if any, paid on behalf of the

SECTION 23. Section 154.189, Family Code, is amended to read as follows:

Sec. 154.189. NOTICE OF TERMINATION OR LAPSE OF INSURANCE COVERAGE. (a) An obligor ordered to provide health insurance coverage or dental insurance coverage for a child must notify the obligee and any child support agency enforcing a support obligation against the obligor of the:

(1) termination or lapse of health insurance coverage or dental insurance coverage for the child not later than the 15th day after the date of a termination or lapse; and

(2) availability of additional health insurance or $\underline{\text{dental insurance}}$ to the obligor for the child after a termination or lapse of coverage not later than the 15th day after the date the insurance becomes available.

(b) If termination of coverage results from a change of employers, the obligor, the obligee, or the child support agency may send the new employer a copy of the order requiring the employee to provide health insurance or dental insurance for a child or notice of the medical support order or the dental support order as provided by this subchapter.

SECTION 24. Section 154.190, Family Code, is amended to read as follows:

Sec. 154.190. REENROLLING CHILD FOR INSURANCE COVERAGE. After health insurance or dental insurance has been terminated or has lapsed, an obligor ordered to provide health insurance coverage or dental insurance coverage for the child must enroll the child in a health insurance plan or a dental insurance plan at the next available enrollment period.

SECTION 25. Section 154.191, Family Code, is amended to read as follows:

Sec. 154.191. REMEDY NOT EXCLUSIVE. (a) This subchapter does not limit the rights of the obligor, obligee, local domestic relations office, or Title IV-D agency to enforce, modify, or clarify the medical support order or dental support order.

(b) This subchapter does not limit the authority of the court to render or modify a medical support order or dental support order to provide for payment of uninsured health expenses, health care costs, [ex] health insurance premiums, uninsured dental expenses, dental costs, or dental insurance premiums in a manner consistent with this subchapter.

SECTION 26. Section 154.192, Family Code, is amended to

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Sec. 154.192. CANCELLATION OR ELIMINATION OF INSURANCE COVERAGE FOR CHILD. $[\frac{a}{a}]$ Unless the employee or member ceases to be eligible for dependent coverage, or the employer has eliminated dependent health coverage or dental coverage for all of the employer's employees or members, the employer may not cancel or eliminate coverage of a child enrolled under this subchapter until the employer is provided satisfactory written evidence that:

(1) the court order or administrative order requiring

the coverage is no longer in effect; or

(2) the child is enrolled in comparable [health] insurance coverage or will be enrolled in comparable coverage that will take effect not later than the effective date of the cancellation or elimination of the employer's coverage.

SECTION 27. The heading to Section 154.193, Family Code, is

amended to read as follows:

Sec. 154.193. MEDICAL SUPPORT ORDER OR DENTAL SUPPORT ORDER NOT QUALIFIED.

SECTION 28. Subsection (a), Section 154.193, Family Code, is amended to read as follows:

(a) If a plan administrator or other person acting in an equivalent position determines that a medical support order or dental support order issued under this subchapter does not qualify for enforcement under federal law, the tribunal may, on its own motion or the motion of a party, render an order that qualifies for enforcement under federal law.

SECTION 29. Subsections (a) and (a-2), Section 156.401,

Family Code, are amended to read as follows:

- (a) Except as provided by Subsection (a-1), (a-2), or (b), the court may modify an order that provides for the support of a child, including an order for health care coverage under Section 154.182 or an order for dental care coverage under Section 154.1825, if:
- (1) the circumstances of the child or a person affected by the order have materially and substantially changed since the earlier of:
 - (A) the date of the order's rendition; or
- (B) the date of the signing of a mediated or collaborative law settlement agreement on which the order is based; or
- (2) it has been three years since the order was rendered or last modified and the monthly amount of the child support award under the order differs by either 20 percent or \$100 from the amount that would be awarded in accordance with the child support guidelines.
- (a-2) A court or administrative order for child support in a Title IV-D case may be modified as provided under Section 233.013(c) to provide for medical support or dental support for $[\frac{of}{a}]$ a child.

SECTION 30. Section 157.269, Family Code, is amended to read as follows:

Sec. 157.269. RETENTION OF JURISDICTION. A court that renders an order providing for the payment of child support retains continuing jurisdiction to enforce the order, including by adjusting the amount of the periodic payments to be made by the obligor or the amount to be withheld from the obligor's disposable earnings, until all current support, [and] medical support, dental support, and child support arrearages, including interest and any applicable fees and costs, have been paid.

SECTION 31. Subsections (a) and (b), Section 158.206,

Family Code, are amended to read as follows:

- (a) An employer receiving an order or a writ of withholding under this chapter, including an order or writ directing that health insurance or dental insurance be provided to a child, who complies with the order or writ is not liable to the obligor for the amount of income withheld and paid as required by the order or writ.
- (b) An employer receiving an order or writ of withholding who does not comply with the order or writ is liable:
 - (1) to the obligee for the amount not paid in

compliance with the order or writ, including the amount the obligor 9-1 9-2 is required to pay for health insurance or dental insurance under 9-3 Chapter 154; 9-4

(2) to the obligor for:

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- (A) the amount withheld and not paid as required by the order or writ; and
- an amount equal to the interest that accrues (B) under Section 157.265 on the amount withheld and not paid; and
 - for reasonable attorney's fees and court costs. (3)

SECTION 32. Section 158.302, Family Code, is amended to read as follows:

Sec. 158.302. CONTENTS OF F NOTICE OF APPLICATION FOR The notice of application for JUDICIAL WRIT OF WITHHOLDING. judicial writ of withholding shall be verified and:

- (1) state the amount of monthly support due, including medical support and dental support, the amount of arrearages or anticipated arrearages, including accrued interest, and the amount of wages that will be withheld in accordance with a judicial writ of withholding;
- (2)state that the withholding applies to each current or subsequent employer or period of employment;
- state that if the obligor does not contest the (3) withholding within 10 days after the date of receipt of the notice, the obligor's employer will be notified to begin the withholding;

(4) describe the procedures for contesting issuance and delivery of a writ of withholding;
(5) state that if the obligor contests

- obligor withholding, the obligor will be afforded an opportunity for a hearing by the court not later than the 30th day after the date of receipt of the notice of contest;
- state that the ground for successfully (6) sole contesting the issuance of a writ of withholding is a dispute concerning the identity of the obligor or the existence or amount of the arrearages, including accrued interest;
- (7) describe the actions that may be taken if the obligor contests the notice of application for judicial writ of withholding, including the procedures for suspending issuance of a writ of withholding; and
- (8) include with the notice a suggested form for the motion to stay issuance and delivery of the judicial writ of withholding that the obligor may file with the clerk of the appropriate court.

SECTION 33. Subsection (c), Section 158.309, Family Code, is amended to read as follows:

Upon hearing, the court shall:
(1) render an order for income withholding that includes a determination of the amount of child support arrearages, including medical support, dental support, and interest; or

(2) grant the motion to stay.

SECTION 34. Subsection (a), Section 158.312, Family Code, is amended to read as follows:

(a) If a notice of application for judicial writ withholding is delivered and a motion to stay is not filed within the time limits provided by Section 158.307, the party who filed the notice shall file with the clerk of the court a request for issuance of the writ of withholding stating the amount of current support, including medical support and dental support, the amount of arrearages, and the amount to be withheld from the obligor's income.

SECTION 35. Section 158.314, Family Code, is amended to read as follows:

Sec. 158.314. CONTENTS OF WRIT OF WITHHOLDING. judicial writ of income withholding issued by the clerk must direct that the employer or a subsequent employer withhold from the obligor's disposable income for current child support, including medical support <u>and dental support</u>, and child support arrearages an amount that is consistent with the provisions of this chapter regarding orders of withholding.

SECTION 36. Subsection (a), Section 158.502, Family Code,

10-1 is amended to read as follows:

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(a) An administrative writ of withholding under this subchapter may be issued by the Title IV-D agency at any time until all current support, including medical support <u>and dental support</u>, [and] child support arrearages, and Title IV-D service fees authorized under Section 231.103 for which the obligor is responsible $[\tau]$ have been paid. The writ issued under this subsection may be based on an obligation in more than one support

SECTION 37. Subsection (b), Section 158.504, Family Code, is amended to read as follows:

(b) An administrative writ of withholding issued under this subchapter may contain only the information that is necessary for the employer to withhold income for child support, [and] medical support, and dental support and shall specify the place where the withheld income is to be paid.

SECTION 38. Section 158.507, Family Code, is amended to

read as follows:

ADMINISTRATIVE WRIT TERMINATING WITHHOLDING. Sec. 158.507. An administrative writ to terminate withholding may be issued and delivered to an employer by the Title IV-D agency when all current support, including medical support and dental support, [and] child support arrearages, and Title IV-D service fees authorized under Section 231.103 for which the obligor is responsible $[\tau]$ have been paid.

SECTION 39. Subsection (c), Section 159.502, Family Code, is amended to read as follows:

- Except as otherwise provided in Subsection (d) and Section 159.503, the employer shall withhold and distribute the funds as directed in the withholding order by complying with terms of the order that specify:
- (1) the duration and amount of periodic payments of current child support, stated as a sum certain;
- (2) the person designated to receive payments and the address to which the payments are to be forwarded;
- (3) medical support and dental support, whether in the form of periodic cash payments, stated as a sum certain, or ordering the obligor to provide health insurance coverage or dental insurance coverage for the child under a policy available through the obligor's employment;
- (4) the amount of periodic payments of fees and costs for a support enforcement agency, the issuing tribunal, and the obligee's attorney, stated as sums certain; and
- (5) the amount of periodic payments of arrearages and

interest on arrearages, stated as sums certain.

SECTION 40. The heading to Section 231.0011, Family Code, is amended to read as follows:

Sec. 231.0011. DEVELOPMENT OF STATEWIDE INTEGRATED SYSTEM CHILD SUPPORT, [AND] MEDICAL SUPPORT, AND DENTAL SUPPORT FOR ENFORCEMENT.

SECTION 41. Subsections (a) and (g), Section 231.0011, Family Code, are amended to read as follows:

- The Title IV-D agency shall (a) have final authority on any contract or proposal for delivery of Title IV-D services under this section and in coordination with the Texas Judicial Council, the Office of Court Administration of the Texas Judicial System, the federal Office of Child Support Enforcement, and state, county, and local officials, shall develop and implement a statewide integrated system for child support, [and] medical support, and dental support enforcement, employing federal, state, local, and private resources to:
 - (1) unify child support registry functions;
- (2) record and track all child support orders entered in the state;
- 10-65 (3) establish an automated enforcement process which will use delinquency monitoring, billing, and other enforcement techniques to ensure the payment of current support; 10-66 10-67
- 10-68 (4)incorporate existing enforcement resources into the system to obtain maximum benefit from state and federal 10-69

11-1 funding; and

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11-2 (5) ensure accountability for all participants in the 11-3 process, including state, county, and local officials, private 11-4 contractors, and the judiciary.

(g) Participation in the statewide integrated system for child support, [and] medical support, and dental support enforcement by a county is voluntary, and nothing in this section shall be construed to mandate participation.

SECTION 42. Subsection (e), Section 231.002, Family Code, is amended to read as follows:

- (e) The Title IV-D agency may take the following administrative actions with respect to the location of a parent, the determination of parentage, and the establishment, modification, and enforcement of child support, [and] medical support, and dental support orders required by 42 U.S.C. Section 666(c), without obtaining an order from any other judicial or administrative tribunal:
- (1) issue an administrative subpoena, as provided by Section 231.303, to obtain financial or other information;
- (2) order genetic testing for parentage determination, as provided by Chapter 233;
- (3) order income withholding, as provided by Chapter 233, and issue an administrative writ of withholding, as provided by Chapter 158; and
- (4) take any action with respect to execution, collection, and release of a judgment or lien for child support necessary to satisfy the judgment or lien, as provided by Chapter 157.

SECTION 43. Subsection (a), Section 231.101, Family Code, is amended to read as follows:

- (a) The Title IV-D agency may provide all services required or authorized to be provided by Part D of Title IV of the federal Social Security Act (42 U.S.C. Section 651 et seq.), including:
 - (1) parent locator services;(2) paternity determination;
- (3) child support, [and] medical support, and dental support establishment;
 - (4) review and adjustment of child support orders;
- (5) enforcement of child support, [and] medical support, and dental support orders; and
- (6) collection and distribution of child support payments.

SECTION 44. Subsection (b), Section 231.104, Family Code, is amended to read as follows:

(b) An application for child support services is an assignment of support rights to enable the Title IV-D agency to establish and enforce child support, [and] medical support, and dental support obligations, but an assignment is not a condition of eligibility for services.

SECTION 45. Subsection (a), Section 231.123, Family Code, is amended to read as follows:

(a) In order to maximize the amount of any tax refund to which an obligor may be entitled and which may be applied to child support, [and] medical support, and dental support obligations, the Title IV-D agency shall cooperate with volunteer income tax assistance programs in the state in informing obligors of the availability of the programs.

SECTION 46. Subsection (a), Section 231.301, Family Code, is amended to read as follows:

- (a) The parent locator service conducted by the Title IV-D agency shall be used to obtain information for:
- (1) child support establishment and enforcement purposes regarding the identity, social security number, location, employer and employment benefits, income, and assets or debts of any individual under an obligation to pay child support, or dental support or to whom a support obligation is owed; or
 - (2) the establishment of paternity. SECTION 47. Section 231.306, Family Code, is amended to

12-1 read as follows:

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Sec. 231.306. MAXIMIZING MEDICAL SUPPORT AND DENTAL SUPPORT ESTABLISHMENT AND COLLECTION BY THE TITLE IV-D AGENCY. (a) On the installation of an automated child support enforcement system, the Title IV-D agency is strongly encouraged to:

(1) maximize the collection of medical support and

dental support; and

(2) establish cash medical support orders for children eligible for medical assistance under the state Medicaid program for whom private insurance coverage is not available.

(b) In this section:

- (1) "Medical[$\overline{,}$ "medical] support" has the meaning assigned by Section 101.020.
- (2) "Dental support" has the meaning assigned by Section 101.0095.

SECTION 48. Subsection (a), Section 233.001, Family Code, is amended to read as follows:

(a) The purpose of the procedures specified in the child support review process authorized by this chapter is to enable the Title IV-D agency to take expedited administrative actions to establish, modify, and enforce child support, [and] medical support, and dental support obligations, to determine parentage, or to take any other action authorized or required under Part D, Title IV, of the federal Social Security Act (42 U.S.C. Section 651 et seq.), and Chapter 231.

SECTION 49. Subsection (b), Section 233.009, Family Code, is amended to read as follows:

- (b) The notice of proposed child support review order shall state:
- (1) the amount of periodic payment of child support due, the amount of any overdue support that is owed as an arrearage as of the date of the notice, and the amounts that are to be paid by the obligor for current support due and in payment on the arrearage owed;
- (2) that the person identified in the notice as the party responsible for payment of the support amounts may contest the notice order on the grounds that:
 - (A) the respondent is not the responsible party;
- (B) the dependent child is no longer entitled to child support; or

(C) the amount of monthly support or arrearage is incorrectly stated; and

(3) that, if the person identified in the notice as the party responsible for payment of the support amounts does not contest the notice in writing or request a negotiation conference to discuss the notice not later than the 15th day after the date the notice was delivered, the Title IV-D agency may file a child support review order for child support, [and for] medical support, and dental support for the child as provided by Chapter 154 according to the information available to the agency.

SECTION 50. Subsection (b), Section 233.0095, Family Code, is amended to read as follows:

- (b) The notice of proposed child support review order shall state:
- (1) the amount of periodic payment of child support due;
- 12-57 (2) that the person identified in the notice as the 12-58 party responsible for payment of the support amounts may only 12-59 contest the amount of monthly support; and
 - (3) that, if the person identified in the notice as the party responsible for payment of the support amounts does not contest the notice in writing or request a negotiation conference to discuss the notice not later than the 15th day after the date the notice was delivered, the Title IV-D agency may file the child support order for child support, [and for] medical support, and dental support for the child as provided by Chapter 154 according to the information available to the agency.

SECTION 51. Subsection (c), Section 233.013, Family Code,

12-69 is amended to read as follows:

Notwithstanding Subsection (b), the Title IV-D agency may, at any time and without a showing of material and substantial change in the circumstances of the parties, file a child support review order that has the effect of modifying an existing order for child support to provide medical support or dental support for a child if the existing order does not provide health care coverage for the child as required under Section 154.182 or dental care coverage for the child as required under Section 154.1825.

SECTION 52. Subsection (a), Section 233.017, Family Code,

is amended to read as follows:

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An order issued under this chapter must be reviewed and (a) signed by an attorney of the Title IV-D agency and must contain all provisions that are appropriate for an order under this title, including current child support, medical support, dental support, a determination of any arrearages or retroactive support, and, if not otherwise ordered, income withholding.

SECTION 53. Section 234.002, Family Code, is amended to read as follows:

INTEGRATED SYSTEM FOR CHILD SUPPORT, [AND] Sec. 234.002. MEDICAL SUPPORT, AND DENTAL SUPPORT ENFORCEMENT. The statewide integrated system for child support, [and] medical support, and dental support enforcement under Chapter 231 shall be part of the state case registry and state disbursement unit authorized by this subchapter.

SECTION 54. Subsection (a), Section 71.035, Government Code, is amended to read as follows:

(a) The council shall gather judicial statistics and other pertinent information from the several state judges and other court officials of this state. In addition, the council shall implement a monthly tracking system to ensure accountability for counties and courts which participate in the statewide integrated system for child support, [and] medical support, and dental support enforcement established under Section 231.0011, Family Code. As a duty of office, the district clerks and county clerks serving the affected courts shall report monthly such information as may be required by the council, including, at a minimum, the time required to enforce cases from date of delinquency, from date of filing, and from date of service until date of disposition. Such information as is necessary to complete the report and not directly within the control of the district or county clerk, such as date of delinquency, shall be provided to the clerk by the child support registry or by the enforcement agency providing Title IV-D enforcement services in the court. The monthly report shall be transmitted to the Office of Court Administration of the Texas Judicial System no later than the 20th day of the month following the month reported, in such form as may be prescribed by the Office $\frac{1}{2}$ of Court Administration, which may include electronic data transfer. Copies of such reports shall be maintained in the office of the appropriate district or county clerk for a period of at least two years and shall be available to the public for inspection and reproduction.

Subsection (c), SECTION 55. Section 848.006, Insurance Code, is amended to read as follows:

- (C) Subsection (a) does not apply to an individual:
- who is required to obtain or maintain health (1)benefit plan coverage:
- (A) written by an institution of higher education at which the individual is or will be enrolled as a student; or
- under an order requiring medical support or (B) <u>dental support</u> for a child; or
- (2) who voluntarily applies for benefits under a state administered program under Title XIX of the Social Security Act (42 U.S.C. Section 1396 et seq.), or Title XXI of the Social Security

Act (42 U.S.C. Section 1397aa et seq.).

SECTION 56. Subsection (b), Section 1201.053, Insurance Code, is amended to read as follows:

13-66 (b) On the application of an adult member of a family, an 13-67 13-68 individual accident and health insurance policy may, at the time of 13-69 original issuance or by subsequent amendment, insure two or more

eligible members of the adult's family, including a unmarried children younger than 25 years of age, incl spouse, including a grandchild of the adult as described by Section 1201.062(a)(1), a child the adult is required to insure under a medical support order or dental support order, if the policy provides dental coverage, issued under Chapter 154, Family Code, or enforceable by a court in this state, and any other individual dependent on the adult.

SECTION 57. Subsection (a), Section 1201.062, Insurance Code, is amended to read as follows:

- (a) An individual or group accident and health insurance policy that is delivered, issued for delivery, or renewed in this state, including a policy issued by a corporation operating under Chapter 842, or a self-funded or self-insured welfare or benefit plan or program, to the extent that regulation of the plan or program is not preempted by federal law, that provides coverage for a child of an insured or group member, on payment of a premium, must provide coverage for:
- (1)each grandchild of the insured or group member if the grandchild is:
 - (A) unmarried;

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- (B)
- younger than 25 years of age; and a dependent of the insured or group member (C) for federal income tax purposes at the time application for coverage of the grandchild is made; and
- (2) each child for whom the insured or group member must provide medical support or dental support, if the policy provides dental coverage, under an order issued under Chapter 154, Family Code, or enforceable by a court in this state.

Section 1201.063, Insurance Code, is amended to SECTION 58. read as follows:

PROHIBITION OF CERTAIN CRITERIA RELATING TO Sec. 1201.063. CHILD'S COVERAGE IN INDIVIDUAL OR GROUP POLICY. Regarding a natural or adopted child of an insured or group member or a child for whom the insured or group member must provide medical support or dental support, if the policy provides dental coverage, under an order issued under Chapter 154, Family Code, or enforceable by a court in this state, an individual or group accident and health insurance policy that provides coverage for a child of an insured or group member may not set a different premium for the child, exclude the child from coverage, or discontinue coverage of the child because:

the child does not reside with the insured or group member; or

(2) the insured or group member does not claim the child as an exemption for federal income tax purposes under Section 151(c) [151(c)(1)(B)], Internal Revenue Code of 1986.

SECTION 59. The heading to Chapter 1504, Insurance Code, is amended to read as follows:

CHAPTER 1504. MEDICAL AND DENTAL CHILD SUPPORT

Section 1504.001, Insurance SECTION 60. Subdivision (4), Code, is amended to read as follows:

(4)"Benefit [Health benefit] plan issuer" means:

(A) an insurance company, group hospital service corporation, or health maintenance organization that delivers or issues for delivery an individual, group, blanket, or franchise insurance policy or agreement, a group hospital service contract, or an evidence of coverage that provides benefits for medical or surgical expenses incurred as a result of an accident or sickness, or dental expenses;

(B) a governmental entity subject to Subchapter D, Chapter 1355, Subchapter C, Chapter 1364, Chapter 1578, Article 3.51-1, 3.51-4, or 3.51-5, or Chapter 177, Local Government Code;

the issuer of a multiple employer welfare (C) arrangement as defined by Section 846.001; or

(D) the issuer of a group health plan as defined by Section 607, Employee Retirement Income Security Act of 1974 (29 U.S.C. Section 1167).

SECTION 61. Subsection (b), 14-68 Section 1504.002, Insurance 14-69 Code, is amended to read as follows:

- 15-1 (b) The commissioner shall adopt rules that define 15-2 "comparable health or dental coverage" in a manner that:
 - (1) is consistent with federal law; and

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(2) complies with the requirements necessary to maintain federal Medicaid funding.

SECTION 62. Section 1504.003, Insurance Code, is amended to read as follows:

Sec. 1504.003. VIOLATION OF CHAPTER: RELIEF AVAILABLE TO INJURED PERSON. A [health] benefit plan issuer that violates this chapter is subject to the same penalties, and an injured person has the same rights and remedies, as those provided by Subchapter D, Chapter 541.

SECTION 63. The heading to Subchapter B, Chapter 1504, Insurance Code, is amended to read as follows:

SUBCHAPTER B. DUTIES OF [HEALTH] BENEFIT PLAN ISSUER

SECTION 64. Section 1504.051, Insurance Code, is amended to read as follows:

- Sec. 1504.051. ENROLLMENT OF CERTAIN CHILDREN REQUIRED. (a) A [health] benefit plan issuer shall permit a parent to enroll a child in dependent health or dental coverage offered through the issuer regardless of any enrollment period restriction if the parent is:
- (1) eligible for dependent health <u>or dental</u> coverage; and
- (2) required by a court order or administrative order to provide health <u>or dental</u> insurance coverage for the child.
- (b) A [health] benefit plan issuer shall enroll a child of a parent described by Subsection (a) in dependent health or dental coverage offered through the issuer if:
- (1) the parent does not apply to obtain health $\underline{\text{or}}$ dental coverage for the child through the issuer; and
- (2) the child, a custodial parent of the child, or a child support agency having a duty to collect or enforce support for the child applies for the coverage.

SECTION 65. Section 1504.052, Insurance Code, is amended to read as follows:

- Sec. 1504.052. CHILD RESIDING OUTSIDE SERVICE AREA; COMPARABLE HEALTH OR DENTAL COVERAGE REQUIRED. (a) A [health] benefit plan issuer may not deny enrollment of a child under the health or dental coverage of the child's parent on the ground that the child does not reside in the issuer's service area.
- (b) A [health] benefit plan issuer may not enforce an otherwise applicable provision of the health or dental coverage that would deny, limit, or reduce payment of a claim for a covered child who resides outside the issuer's service area but inside the United States.
- (c) For a covered child who resides outside the [health] benefit plan issuer's service area and whose coverage under a policy or plan is required by a medical support order or dental support order, the issuer shall provide coverage that is comparable health or dental coverage to that provided to other dependents under the policy or plan.
- (d) Comparable health <u>or dental</u> coverage may include coverage in which a [health] benefit plan issuer uses different procedures for service delivery and health care provider reimbursement. Comparable health <u>or dental</u> coverage may not include coverage:
 - (1) that is limited to emergency services only; or
 - (2) for which the issuer charges a higher premium.

SECTION 66. Section 1504.053, Insurance Code, is amended to read as follows:

Sec. 1504.053. CANCELLATION OR NONRENEWAL OF COVERAGE FOR CERTAIN CHILDREN. (a) A [health] benefit plan issuer may not cancel or refuse to renew health or dental coverage provided to a child who is enrolled or entitled to enrollment under this chapter unless satisfactory written evidence is filed with the issuer showing that:

15-68 (1) the court or administrative order that required 15-69 the coverage is not in effect; or

(2) the child:

(A) is enrolled in comparable health or dental

coverage; or

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(B) will be enrolled in comparable health or dental coverage that takes effect not later than the effective date of the cancellation or nonrenewal.

(b) For purposes of this section, a child is not enrolled or entitled to enrollment under this chapter if the child's eligibility for health or dental coverage ends because the parent ceases to be eligible for dependent health or dental coverage.

SECTION 67. Section 1504.054, Insurance Code, is amended to read as follows:

Sec. 1504.054. CONTINUATION OR CONVERSION OF COVERAGE. (a) If a child's eligibility for dependent health or dental coverage ends because the parent ceases to be eligible for the coverage and the coverage provides for the continuation or conversion of the coverage for the child, the [health] benefit plan issuer shall notify the custodial parent and the child support agency of the costs and other requirements for continuing or converting the coverage.

converting the coverage.

(b) The [health] benefit plan issuer shall, on application of a parent of the child, a child support agency, or the child, enroll or continue enrollment of a child whose eligibility for

coverage ended under Subsection (a).

SECTION 68. Section 1504.055, Insurance Code, is amended to read as follows:

Sec. 1504.055. PROCEDURE FOR CLAIMS. (a) A [health] benefit plan issuer that provides health or dental coverage to a child through a covered parent of the child shall:

(1) provide to each custodial parent of the child or to an adult child documents and other information necessary for the child to obtain benefits under the coverage, including:

(A) the name of the issuer;

(B) the number of the policy or evidence of

coverage;

(C) a copy of the policy or evidence of coverage and schedule of benefits;

(D) a health or dental coverage membership card;

(E) claim forms; and

(F) any other document or information necessary to submit a claim in accordance with the issuer's policies and procedures;

(2) permit a custodial parent, health care provider, state agency that has been assigned medical <u>or dental</u> support rights, or adult child to submit claims for covered services without the approval of the covered parent; and

(3) make payments on covered claims submitted in accordance with this subsection directly to a custodial parent, health care or dental care provider, adult child, or state agency

making a claim.

(b) A [health] benefit plan issuer shall provide to a state agency that provides medical assistance, including medical assistance for dental services, to the child or shall provide to a child support agency that enforces medical or dental support on behalf of a child the information necessary to obtain reimbursement of medical or dental services provided to or paid on behalf of the child.

SECTION 69. Section 1504.101, Insurance Code, is amended to read as follows:

Sec. 1504.101. DENIAL OF ENROLLMENT ON CERTAIN GROUNDS PROHIBITED. A [health] benefit plan issuer may not deny enrollment of a child under the health or dental coverage of the child's parent on the ground that the child:

(1) has a preexisting condition;

(2) was born out of wedlock;

(3) is not claimed as a dependent on the parent's federal income tax return;

(4) does not reside with the parent; or

(5) receives or has applied for medical assistance.

17-1 SECTION 70. Section 1504.102, Insurance Code, is amended to 17-2 read as follows:

Sec. 1504.102. ASSIGNMENT OF MEDICAL OR DENTAL SUPPORT RIGHTS: DIFFERENT REQUIREMENTS PROHIBITED. A [health] benefit plan issuer may not require a state agency that has been assigned the rights of an individual who is eligible for medical assistance and is covered for health or dental benefits from the issuer to comply with a requirement that is different from a requirement imposed on an agent or assignee of any other covered individual.

SECTION 71. Section 402.085, Labor Code, is amended to read as follows:

Sec. 402.085. EXCEPTIONS TO CONFIDENTIALITY. (a) The division shall release information on a claim to:

- (1) the Texas Department of Insurance for any statutory or regulatory purpose, including a research purpose under Chapter 405;
 - (2) a legislative committee for legislative purposes;
- (3) a state or federal elected official requested in writing to provide assistance by a constituent who qualifies to obtain injury information under Section 402.084(b), if the request for assistance is provided to the division;
- (4) the attorney general or another entity that provides child support services under Part D, Title IV, Social Security Act (42 U.S.C. Section 651 et seq.), relating to:
- (A) establishing, modifying, or enforcing a child support, [ex] medical support, or dental support obligation; or
 - (B) locating an absent parent; or
- (5) the office of injured employee counsel for any statutory or regulatory purpose that relates to a duty of that office as provided by Section 404.111(a).
- (b) The division may release information on a claim to a governmental agency, political subdivision, or regulatory body to use to:
- (1) investigate an allegation of a criminal offense or licensing or regulatory violation;
 - (2) provide:

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- (A) unemployment compensation benefits;
- (B) crime victims compensation benefits;
- (C) vocational rehabilitation services; or
- (D) health care benefits;
- (3) investigate occupational safety or health violations;
- (4) verify income on an application for benefits under an income-based state or federal assistance program; or
- (5) assess financial resources in an action, including an administrative action, to:
- (A) establish, modify, or enforce a child support, or dental support obligation;
 - (B) establish paternity;
 - (C) locate an absent parent; or
- (D) cooperate with another state in an action authorized under Part D, Title IV, Social Security Act (42 U.S.C. Section 651 et seq.), or Chapter 231, Family Code.
- Section 651 et seq.), or Chapter 231, Family Code.

 SECTION 72. (a) The changes in law made by this Act apply to a suit affecting the parent-child relationship filed on or after the effective date of this Act. A suit affecting the parent-child relationship filed before the effective date of this Act is governed by the law in effect on the date the suit was filed, and the former law is continued in effect for that purpose.
- (b) The change in law made by this Act does not by itself constitute a material and substantial change of circumstances under Section 156.401, Family Code, sufficient to warrant modification of a court order or a portion of a decree that provides for the support of a child rendered before the effective date of this Act.

17-66 SECTION 73. This Act takes effect September 1, 2013.

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