

**DETERMINING
MEDICAL SUPPORT
IN
IOWA**

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DETERMINING MEDICAL SUPPORT IN IOWA

1. Generally: The nature and extent of medical support to be ordered depends on the parents' respective incomes, and whether either parent has a health benefit plan¹ ("Plan") available at a reasonable cost.

A. Reasonable cost is a benchmark figure which is determined under Rule 9.12 of the Iowa Child Support Guidelines (Chapter 9, Iowa Court Rules; "Guidelines"). Most of the commercially available child support calculating software programs have the ability to determine reasonable cost.

B. Generally, plans include those offered through an employer, even if the employee is not presently enrolled in the plan, or the 'enrollment window' has not yet opened. A plan is available if the cost to add the children² is at the parent's reasonable cost or less (see §252E.1A(3)(a) Iowa Code), and is accessible; "accessible" means the plan does not have service area limitations or provides an option not subject to service area limitations, or, if the plan has service area limitations, the child lives within thirty miles or thirty minutes of a network primary care provider. See §252E.1(1) Iowa Code.

C. A general explanation for determining reasonable cost, and the nature and extent of medical support to be ordered, is in the following paragraphs.

2. Of Note: Prior to October 2018, public health care coverage, that is, Healthy and Well Kids Iowa ("HAWK-I") and Title 19 Medicaid ("Medicaid"), were not included in the definition of a plan, and a parent could not be ordered to provide a plan for a child through either program. As of October 2018, both HAWK-I and Medicaid are included in the definition (see footnote one), and a person who has enrolled a child in either HAWK-I or Medicaid is allowed to provide that coverage as medical support.

3. What is Cash Medical Support? Under §252E.1(3) Iowa Code, "cash medical support" is "a monetary amount that a parent is ordered to pay [...] instead of [...] providing health care coverage." Cash medical support is calculated in the same manner as in which reasonable cost is determined (in other words, if you have determined the reasonable cost, you have also determined the amount of cash medical support, if cash medical support is ordered). Cash medical support is not always ordered, nor is it always required when a child is enrolled in Medicaid.

4. Initial Information: To determine what medical support should be ordered, you must first gather the following information for each parent:

A. Gross Monthly Income.

- (1). Whether that income was imputed.
- (2). Whether that parent has actual income which can be reached by income withholding.

B. Allowable Deductions.

C. Preliminary Net Income.³

¹ "Health benefit plan" means any policy or contract of insurance, indemnity, subscription or membership issued by an insurer, health service corporation, health maintenance organization, or any similar corporation or organization, any public coverage, or any self-insured employee benefit plan, for the purpose of covering medical expenses. See §252E.1(8) Iowa Code.

² For our purposes, references to "children" includes both the singular "child" and plural "children" as the context requires.

³ Preliminary net income is gross monthly income less all allowable deductions, but does not include a deduction for cash medical support. The initial net income figure is needed to determine the reasonable cost of a health benefit plan, which is needed to determine the nature and extent of medical support to be ordered, including whether that support will be cash medical support.

- D. Private Plans:** Whether the parent⁴ has a plan available in which the children may be or are enrolled; and, if the parent does have a plan available:
- (1). What is the single premium cost?⁵
 - (2). What is the family premium cost?⁶
 - (3). What is the difference between the single premium cost and the family premium cost?⁷
 - (4). In addition to the parent, how many people, including the children on this case, are covered by the plan?
- E. HAWK-I:** Whether the parent has the children enrolled in HAWK-I, and, if the parent does, the total HAWK-I premium cost paid by the parent for the children in that parent's household.
- F. Medicaid:** Whether the parent has the children enrolled in Medicaid.
- G. Other Information:** Whether the parent:
- (1). Receives Family Investment Program ("FIP") funds under Chapter 239B Iowa Code; FIP has also been known as Temporary Aid for Needy Families ("TANF") and Aid to Families with Dependent Children ("AFDC").
 - (2). Receives Medical Assistance (Medicaid) under Chapter 249A Iowa Code.
 - (3). Resides with a child or children,⁸ not of this case, who are enrolled in HAWK-I or Medicaid.

5. Arriving at Preliminary Net Income: To arrive at the *preliminary net* income, begin with the parent's gross monthly income,⁹ and subtract all the allowable deductions.¹⁰ Because you have not yet determined whether cash medical support will be ordered in this action, no deduction is given for cash medical support (however, if cash medical support has been ordered in another action, with other children, a deduction may be given for the other cash medical support to the extent it was actually paid).

6. Determining Reasonable Cost: To determine each parent's reasonable cost figure, locate the respective parent's *preliminary net* monthly income on the chart in Rule 9.12(4) Guidelines, and then read over to the percentage figure for the number of children who are the subject of the support proceedings. This percentage figure is then multiplied against that parent's *gross* monthly income, and the result is that parent's reasonable cost.

⁴ The plan may be offered through the parent's spouse (the stepparent of the children).

⁵ The single premium cost is the premium cost to cover the parent only.

⁶ The family premium cost is the total premium cost to cover the parent and the children.

⁷ Subtract the single premium cost from the family premium cost.

⁸ These children must be children to whom the parent has a legal obligation; see §252E.2A(4) Iowa Code and Rule 9.7 Guidelines.

⁹ See Rule 9.5(1) Guidelines for a definition of gross income and how to address adjusting for spousal support.

¹⁰ See Rules 9.5(2), 9.6, 9.7, and 9.8 Guidelines.

- A. **Example 1:** A parent has \$1,950.00 gross monthly income, and \$1,525.00 preliminary net monthly income, and the support proceedings involve two children. Using the chart in Rule 9.12(4), we see that the percentage figure is 3%, which, when multiplied against the gross monthly income, results in a \$59.00 reasonable cost figure.
- B. **Example 2:** A parent has \$1,733.00 gross monthly income, and \$1,345.00 preliminary net monthly income, and the support proceedings involves one child. Using the chart in Rule 9.12(4), we see that the percentage figure is 3%, which, when multiplied against the gross monthly income, results in a \$52.00 reasonable cost figure.

7. Determining the Cost to Add the Children: You will now be using the initial information you gathered about each parents' available plans to determine the cost to add the children to the plan. Once you know the cost to add the children, you will compare it to the parent's reasonable cost figure.

A. Private Plans: To determine the cost to add the children:

- (1). Find the difference between the premium costs for single coverage and family coverage (subtract the premium cost for single coverage from the premium cost for family coverage).
- (2). Exclude the person¹¹ who is or could be providing the coverage, and divide the difference in costs by the number of people enrolled in the family coverage; the result is the *pro rata* (proportionate) cost per person covered.
- (3). Multiply the *pro rata* cost by the number of children who are the subject of the action; the result is the total cost to add the children.
- (4). **Example:** You are modifying the support provisions of a dissolution decree which involves two children. The parent has remarried, and has one new child in common with the new spouse, as well as one stepchild. The parent has a health benefit plan available through the parent's employer with a single premium cost of \$150.00, and a family premium cost of \$400.00. The parent is enrolled in the single coverage, and the spouse, the new child, the stepchild, and the two children on the case are all enrolled in the family coverage (a total of six people). What is the cost to add the children for your modification action?

Step 1:	$\begin{array}{r} \$400.00 \\ - \underline{\$150.00} \\ \hline \$250.00 \end{array}$	Family Premium Cost Single Premium Cost Difference in Premium Costs
Step 2:	$\begin{array}{r} 6 \\ - \underline{1} \\ \hline 5 \end{array}$	Number of People Enrolled Excluding the Providing Parent People Enrolled in Family Coverage
Step 3:	$\begin{array}{r} \$250.00 \\ \div \underline{\quad 5} \\ \hline \$ 50.00 \end{array}$	Difference in Premium Costs People Enrolled in Family Coverage Pro Rata Cost per Person Covered

¹¹ This person is excluded because they are enrolled and covered by single premium cost, while everyone else is enrolled and covered by the difference between the single and family premium costs.

Step 4:	\$ 50.00	Pro Rata Cost per Person Covered
	x $\frac{2}{}$	Children in this Action
	\$100.00	Cost to Add the Children

B. HAWK-I: To determine the cost to add the children:

- (1). Determine if the parent has the children who are the subject of the action enrolled in HAWK-I.
- (2). Find the total HAWK-I premium cost paid by the parent for all the children in that parent's household. This is the cost to add the children.

C. Medicaid: To determine the cost to add the children:

- (1). Determine if the parent has the children who are the subject of the action enrolled in Medicaid.
- (2). There is no cost to add the children.

8. Determining Whether the Plan is of a Reasonable Cost: Now that you know the parents' respective reasonable costs and the parents' respective costs to add the children, you can determine whether the available plans are of a reasonable cost:

A. Private Plans: Compare the parent's reasonable cost to the cost to add the children.

- (1). If the reasonable cost is less than the cost to add the children, the plan is of a reasonable cost.
- (2). Conversely, if the reasonable cost is more than the cost to add the children, the plan is not of a reasonable cost.

B. HAWK-I: Compare the parent's reasonable cost to the total HAWK-I premium cost paid by the parent for all the children in that parent's household.

- (1). If the reasonable cost is less than the total HAWK-I premium cost, the plan is of a reasonable cost.
- (2). Conversely, if the reasonable cost is more than the total HAWK-I premium cost, the plan is not of a reasonable cost.

C. Medicaid: There is no cost to add the children, and, thus, the plan is of a reasonable cost.

D. Consent to more than reasonable cost. Pursuant to §252E.1A(3)(a)(2) Iowa Code, a parent may consent (or not object) to being ordered to provide a plan that is for more than reasonable cost. Note that the health insurance add-on or deduction may apply if the NCP's preliminary net income is \$1,151.00 or more, but will not apply if NCP's preliminary net income is \$1,150.00 or below. If the health insurance add-on or deduction applies, it will affect the amount of child support ordered. See Rule 9.12(4) Guidelines.

9. Determining the Nature and Extent of Medical Support: Not only is the above information necessary to determine the nature and extent of medical support to be ordered, the determination must be made in light of the custodial award. There are differing steps depending on whether

primary physical care custody has been awarded to one parent, or whether it is shared or split physical care custody between both parents.

A. Initial Information Needed: See paragraph four above. To determine what medical support should be ordered, you must first gather the following information for each parent:

(1). Gross Monthly Income.

- (a).** Whether that income was imputed.
- (b).** Whether that parent has actual income which can be reached by income withholding.

(2). Allowable Deductions.

(3). Preliminary Net Income.¹²

(4). Private Plans: Whether the parent¹³ has a plan available¹⁴ in which the children may be or are enrolled; and, if the parent does have a plan available:

- (a).** What is the single premium cost?¹⁵
- (b).** What is the family premium cost?¹⁶
- (c).** What is the difference between the single premium cost and the family premium cost?¹⁷
- (d).** In addition to the parent, how many people, including the children on this case, are covered by the plan?

(5). HAWK-I: Whether the parent has the children enrolled in HAWK-I, and, if the parent does, the total HAWK-I premium cost paid by the parent for the children in that parent's household.

(6). Medicaid: Whether the parent has the children enrolled in Medicaid.

(7). Other Information: Whether the parent:

¹² Preliminary net income is gross monthly income less all allowable deductions, but does not include a deduction for cash medical support. The initial net income figure is needed to determine the reasonable cost of a health benefit plan, which is needed to determine the nature and extent of medical support to be ordered, including whether that support will be cash medical support.

¹³ The plan may be offered through the parent's spouse (the stepparent of the children).

¹⁴ Generally, this will be a plan available through an employer, even if the employee is not presently enrolled in the plan, or the 'enrollment window' has not yet opened. A plan is available if the cost to add the child is at the parent's reasonable cost or less (see §252E.1A(3)(a) Iowa Code), and is accessible; "accessible" means the plan does not have service area limitations or provides an option not subject to service area limitations, or, if the plan has service area limitations, the child lives within thirty miles or thirty minutes of a network primary care provider. See §252E.1(1) Iowa Code.

¹⁵ The single premium cost is the premium cost to cover the parent only.

¹⁶ The family premium cost is the total premium cost to cover the parent and the children.

¹⁷ Subtract the single premium cost from the family premium cost.

- (a). Receives Family Investment Program (“FIP”) funds under Chapter 239B Iowa Code; FIP has also been known as Temporary Aid for Needy Families (“TANF”) and Aid to Families with Dependent Children (“AFDC”).
- (b). Receives Medical Assistance (Medicaid) under Chapter 249A Iowa Code.
- (c). Resides with a child or children,¹⁸ not of this case, who are enrolled in HAWK-I or Medicaid.

B. Process: Take the following steps:

- (1). Find each parent’s preliminary net income. See paragraph five above.
- (2). Using the Medical Support Table of Rule 9.12(4) Guidelines, determine each parent’s reasonable cost. See paragraph 6 above.
- (3). Calculate each parent’s cost to add the children to that parent’s plan. See paragraph 7 above.
- (4). Compare each parent’s cost to add the children to that parent’s reasonable cost to determine if each plan is of reasonable cost. See paragraph eight above.
- (5). Compare the plans and decide which plan will be ordered. Note that HAWK-I and Medicaid are now included in the definition of plan, and CP may be ordered to provide coverage. Also note that regardless of which parent is providing the plan, the cost of the plan may be prorated between the parents as a health insurance add-on or deduction to the child support obligation; see Rule 9.14(2) (Section I) Guidelines.
- (6). HAWK-I limitation: If a parent has the children enrolled in HAWK-I, and cash medical support is to be ordered, the amount of the cash medical support is limited to the total HAWK-I premium in the parent’s household.
- (7). Cash medical support is not always ordered. There are several exceptions to the ordering of cash medical support; if one of the exceptions exists, cash medical support should not be ordered.

C. Exceptions to Ordering Cash Medical Support: The following are exceptions to ordering cash medical support:

- (1). **Receives FIP or Medicaid:** If the parent is a recipient of FIP or Medicaid,¹⁹ or if the parent resides with a child to whom parent has a legal obligation, who is not the subject of the action, and the child is enrolled in

¹⁸ These children must be children to whom the parent has a legal obligation; see §252E.2A(4) Iowa Code and Rule 9.7 Guidelines.

¹⁹ Recipient means that the person is included in the household that is receiving FIP or Medicaid; in other words, the parent must be reported to the appropriate agency as being in the household, and the parent’s presence in the household was known and considered when the grant was made. For example, the parent has remarried, and the parent, spouse, and stepchildren all reside together; the spouse applied for and received Medicaid, and listed the parent in the application. Or, alternatively, the parent and a partner reside together with the partner’s children, partner applies for and receives a FIP grant for the household, and listed the parent in the application. If the applicant household did not disclose the parent’s presence in the household, then that parent is not on the FIP or Medicaid grant, and that parent is not receiving FIP or Medicaid, even if that parent actually resides with someone receiving FIP or Medicaid.

HAWK-I or Medicaid, order the parent to provide a plan when one becomes available to parent at no cost. See §252E.1A(4)(c) Iowa Code.

- (2). **Minimal Income:** parent's preliminary net income is between \$0.00 and \$1,150.00, in which case order parent to provide a plan when one becomes available to parent at no cost to add the children. Cash medical support may not be ordered. See §252E.1A(4)(a) Iowa Code, Rule 9.12(2) Guidelines and Area A of the Medical Support Table in Rule 9.12(4) Guidelines.²⁰
- (3). **Parent has Children Enrolled in HAWK-I:** If the parent has the children enrolled in HAWK-I, then cash medical support is limited to the total of the HAWK-I premiums.
- (4). **No Income Subject to Income Withholding:** If the parent does not have any source of income which is subject to income withholding to collect the cash medical support, order the parent to provide a plan when one becomes available to parent at parent's reasonable cost, and specify the reasonable cost. See §252E.1A(4)(b) Iowa Code.²¹

10. Determining Type and Nature of Medical Support to be Ordered: The determinations made under paragraph 9(B) above may now be used to apply the hierarchies contained in §252E.1A and §252E.1B Iowa Code. Flow charts on the following pages set out the necessary questions to navigate the hierarchies, with each possibility culminating in suggested support language which describes the type of support which should be ordered.

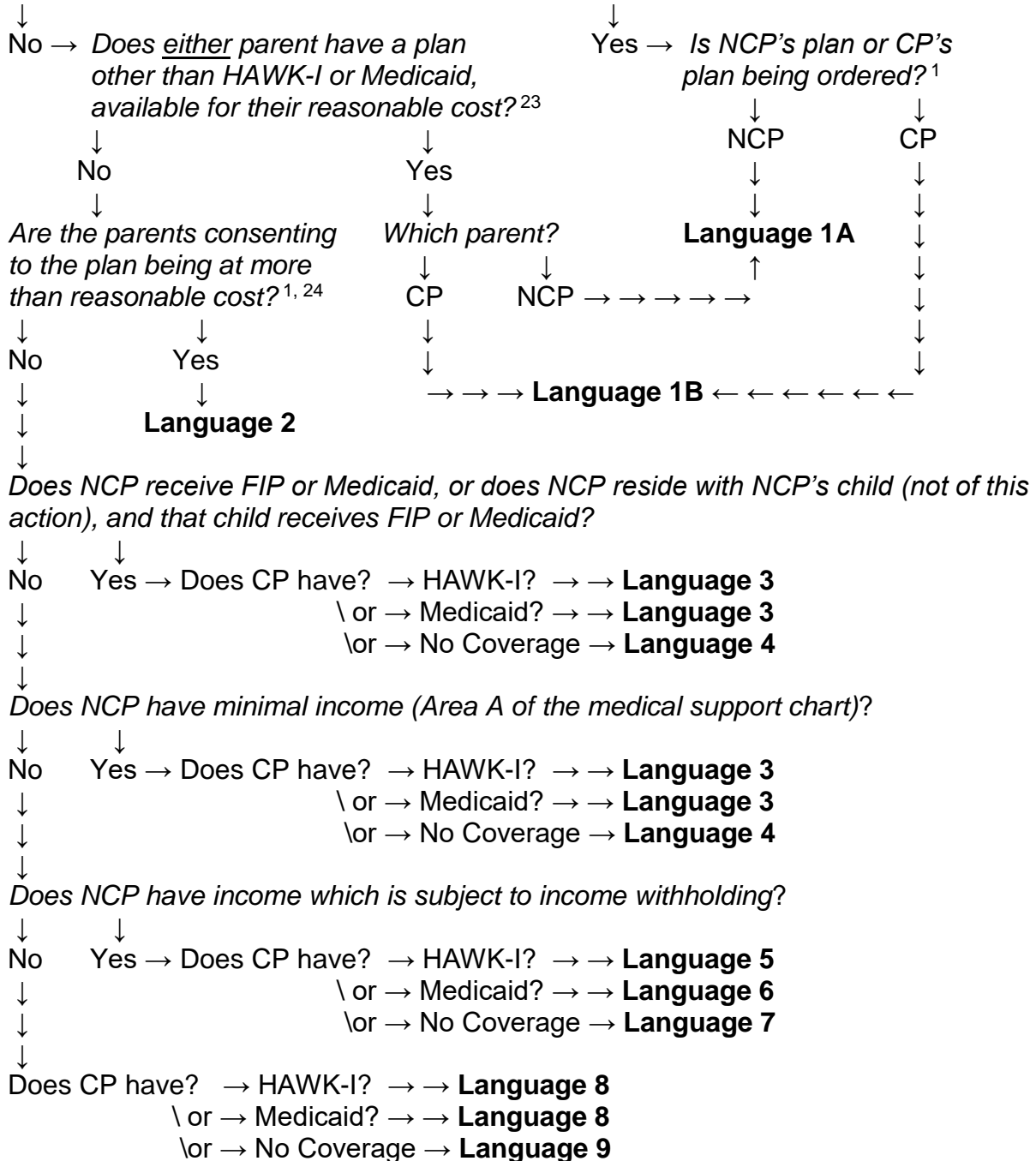
11. Note: The opinions expressed within these writings are solely those of the author, and are not necessarily the policy of or adopted by the State of Iowa's Attorney General's Office, or the State of Iowa's Child Support Recovery Unit. The suggested support language is provided both to explain the statutory requirements in assorted circumstances, as well as to provide a guide to the practitioner for drafting support provisions; the suggested language is not required by any party, agency, or entity, and whether to adopt or use such language is within the considered professional discretion of the individual attorney.

²⁰ In Area A, the cost of the plan is not a health insurance add-on or deduction to the child support obligation. *Id.*

²¹ Generally, this means that income has been imputed to the NCP based on NCP's earning capacity, and that there is no employer to whom an income withholding order may be directed. However, income may be imputed to a party and that party may have an employer or other income source (for example, a party works part-time, but is imputed full-time wages). In those instances, because there is an employer or income source, order the NCP to pay cash medical support.

PRIMARY PHYSICAL CARE CUSTODY TO ONE PARENT

Do both parents²² have a plan, other than HAWK-I or Medicaid, available to them for their respective reasonable costs?



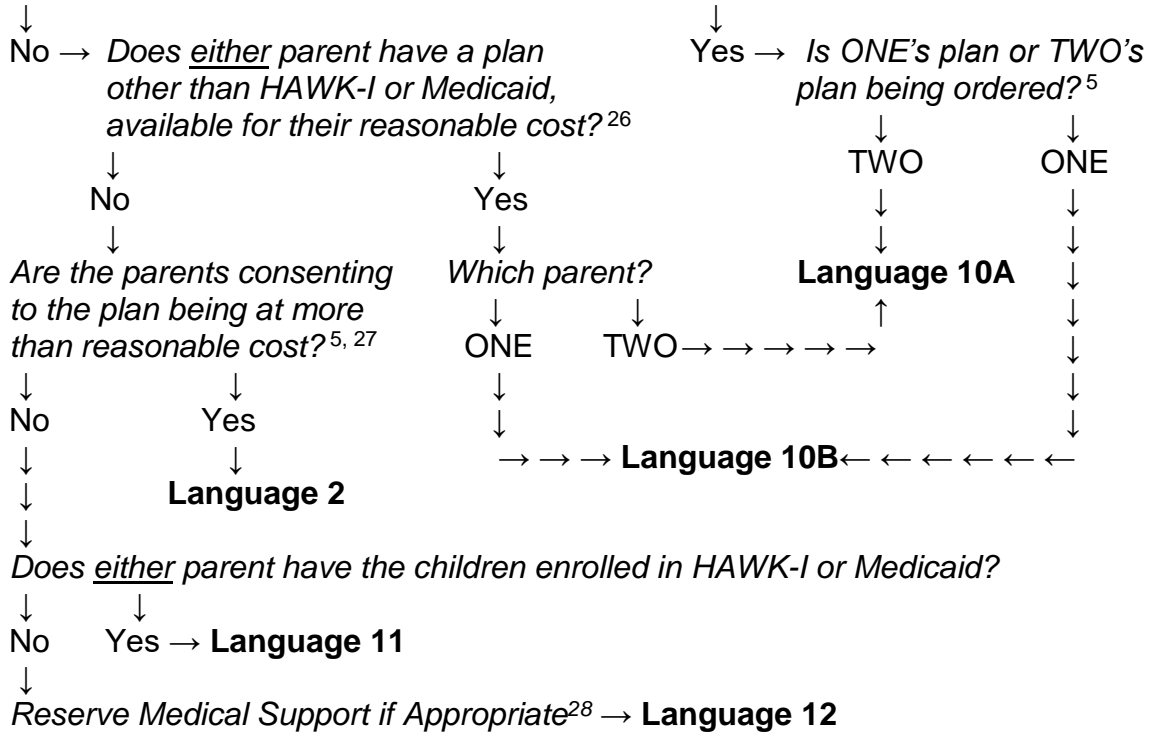
²² For these purposes, the non-custodial parent is referred to as “NCP,” and the custodial parent as “CP.”

²³ Note that the health insurance add-on or deduction may apply if the NCP's preliminary net income is \$1,151.00 or more, but will not apply if NCP's preliminary net income is \$1,150.00 or below. If the health insurance add-on or deduction applies, it will affect the amount of child support ordered. See Rule 9.12(4) Guidelines.

²⁴ The parents must consent or not object. See §252E.1A(3)(a)(2) Iowa Code.

SHARED OR SPLIT PHYSICAL CARE CUSTODY BETWEEN BOTH PARENTS

Do both parents²⁵ have a plan, other than HAWK-I or Medicaid, available to them for their respective reasonable costs?



²⁵ For these purposes, the parents are referred to as "ONE" and "TWO."

²⁶ Note that the health insurance add-on or deduction may apply if the NCP's preliminary net income is \$1,151.00 or more, but will not apply if NCP's preliminary net income is \$1,150.00 or below. If the health insurance add-on or deduction applies, it will affect the amount of child support ordered. See Rule 9.12(4) Guidelines.

²⁷ The parents must consent or not object. See §252E.1A(3)(a)(2) Iowa Code.

²⁸ In this scenario, there is no statutorily mandated outcome under §252E.1A(4) Iowa Code. Because both parents are custodians under an award of shared or split physical care custody, cash medical support and the exceptions do not appear appropriate, and medical support might be reserved. Of course, under §252E.1A(6) Iowa Code the Court might also determine a medical support obligation is appropriate given the facts of a particular case. Even if the Court reserves the issue of medical support, the Court should still order the uncovered medical expense proration required by Rule 9.12(5) Guidelines.

MEDICAL SUPPORT PROVISIONS LANGUAGE

1A – NCP to Provide Plan at Reasonable Cost or Less

Medical Support: NCP-Name has a health benefit plan available in which the child(ren) may be or is / are enrolled, and the health benefit plan is both accessible and reasonable in cost as provided by Chapter 252E Iowa Code and the Guidelines. NCP-Name's reasonable cost in this case is not more than \$ XXX.00 per month to add the child(ren) to the health benefit plan. NCP-Name shall provide a health benefit plan as medical support for the child(ren).

1B – CP to Provide Plan at Reasonable Cost or Less

Medical Support: CP-Name has a health benefit plan available in which the child(ren) may be or is / are enrolled, and the health benefit plan is both accessible and reasonable in cost as provided by Chapter 252E Iowa Code and the Guidelines. CP-Name's reasonable cost in this case is not more than \$ XXX.00 per month to add the child(ren) to the health benefit plan. CP-Name shall provide a health benefit plan as medical support for the child(ren).

2 – One Parent to Provide Plan at More than Reasonable Cost

Medical Support: ParentName has a health benefit plan available in which the child(ren) may be or is / are enrolled, the health benefit plan is accessible but is not reasonable in cost as provided by Chapter 252E Iowa Code and the Guidelines. ParentName's reasonable cost in this case is not more than \$ XXX.00 per month to add the child(ren) to the health benefit plan. However, ParentName consents to providing, and shall provide, a health benefit plan as medical support for the child(ren).

3 – NCP FIP / Medicaid / Minimal Income Exception, CP has HAWK-I or Medicaid

Medical Support: CP-Name has health care coverage available in which the child(ren) may be or is / are enrolled, and the health care coverage is both accessible and reasonable in cost as provided by Chapter 252E Iowa Code and the Guidelines. CP-Name shall provide health care coverage as medical support for the child(ren). Cash medical support is not appropriate because an exception listed in §252E.1A Iowa Code exists. NCP-Name shall provide a health benefit plan that covers the child(ren) when a health benefit plan becomes available at no cost to add the child(ren) to the health benefit plan.

4 – NCP FIP / Medicaid / Minimal Income Exception, CP has No Coverage

Medical Support: Cash medical support is not appropriate because an exception listed in §252E.1A Iowa Code exists. NCP-Name shall provide a health benefit plan that covers the child(ren) when a health benefit plan becomes available at no cost to add the child(ren) to the health benefit plan.

5 – NCP Subject to Withholding, CP has HAWK-I, CMS Limited to HAWK-I Cost

Medical Support: Neither parent has a health benefit plan available to cover the child(ren) that is both accessible and reasonable in cost as provided by Chapter 252E Iowa Code and the Guidelines. A limitation to the ordering of cash medical support under Rule 9.12(3) Guidelines exists, and **NCP** shall pay cash medical support in the amount of \$**XXX**.00 per month commencing **Month XX, 20XX**, and continuing on the same day of each month thereafter.

6 – NCP Subject to Withholding, CP has Medicaid, Order CMS

Medical Support: **CP-Name** has health care coverage available in which the child(ren) may be or is / **are** enrolled, and the health care coverage is both accessible and reasonable in cost as provided by Chapter 252E Iowa Code and the Guidelines. **CP-Name** shall provide health care coverage as medical support for the child(ren). **NCP** shall pay cash medical support in the amount of \$**XXX**.00 per month commencing **Month XX, 20XX**, and continuing on the same day of each month thereafter.

7 – NCP is Subject to Withholding, CP has No Coverage, Order CMS

Medical Support: Neither parent has a health benefit plan available to cover the child(ren) that is both accessible and reasonable in cost as provided by Iowa Code Chapter 252E and the Guidelines, and **NCP** shall pay cash medical support in the amount of \$**XXX**.00 per month commencing **Month XX, 20XX**, and continuing on the same day of each month thereafter.

8 – NCP Not Subject to Withholding Exception, CP has HAWK-I or Medicaid

Medical Support: **CP-Name** has health care coverage available in which the child(ren) may be or is / **are** enrolled, and the health care coverage is both accessible and reasonable in cost as provided by Chapter 252E Iowa Code and the Guidelines. **CP-Name** shall provide health care coverage as medical support for the child(ren). Cash medical support is not appropriate because an exception listed in §252E.1A Iowa Code exists. **NCP** shall provide a health benefit plan that covers the child(ren) when a health benefit plan becomes available at reasonable cost or less. Reasonable cost in this case is not more than \$ **XXX**.00 per month to add the child(ren) to the health benefit plan.

9 – NCP Not Subject to Withholding Exception, CP has No Coverage

Medical Support: Neither parent has a health benefit plan available to cover the child(ren) that is both accessible and reasonable in cost as provided by Chapter 252E Iowa Code and the Guidelines, and cash medical support is not appropriate because an exception listed in §252E.1A Iowa Code exists. **NCP** shall provide a health benefit plan that covers the child(ren) when a health benefit plan becomes available at reasonable cost or less. Reasonable cost in this case is not more than \$ **XXX**.00 per month to add the child(ren) to the health benefit plan.

10A – Parent ONE to Provide Plan at Reasonable Cost or Less

Medical Support: ONE-Name has a health benefit plan available in which the child(ren) may be or is / are enrolled, and the health benefit plan is both accessible and reasonable in cost as provided by Chapter 252E Iowa Code and the Guidelines. ONE-Name's reasonable cost in this case is not more than \$ XXX.00 per month to add the child(ren) to the health benefit plan. ONE-Name shall provide a health benefit plan as medical support for the child(ren).

10B – Parent TWO to Provide Plan at Reasonable Cost or Less

Medical Support: TWO-Name has a health benefit plan available in which the child(ren) may be or is / are enrolled, and the health benefit plan is both accessible and reasonable in cost as provided by Chapter 252E Iowa Code and the Guidelines. TWO-Name's reasonable cost in this case is not more than \$ XXX.00 per month to add the child(ren) to the health benefit plan. TWO-Name shall provide a health benefit plan as medical support for the child(ren).

11 – A Parent has the Children enrolled in HAWK-I or Medicaid

Medical Support: ParentName has health care coverage available in which the child(ren) may be or is / are enrolled, and the health care coverage is both accessible and reasonable in cost as provided by Chapter 252E Iowa Code and the Guidelines. ParentName shall provide health care coverage as medical support for the child(ren). Cash medical support is not appropriate because an exception listed in §252E.1A Iowa Code exists, and §252E.1A(4) Iowa Code is applicable.

12 – Neither Parent has Coverage, Medical Support is Reserved

Medical Support Reserved: Neither parent has a health benefit plan available to cover the child(ren) that is both accessible and reasonable in cost as provided by Chapter 252E Iowa Code and the Guidelines, and cash medical support is not appropriate because an exception listed in §252E.1A Iowa Code exists, and §252E.1A(4) Iowa Code is applicable. The issue of medical support for the child(ren) is reserved.

See the next page for suggested uncovered medical expense proration and duration of support language.

UNCOVERED MEDICAL EXPENSE PRORATION LANGUAGE

Primary Physical Care Custody to One Parent

Uncovered Medical Expenses: Pursuant to Rule 9.12(5), CP shall be responsible for paying the first \$250.00 per child per year of the child(ren)'s uncovered medical expenses, up to a yearly maximum of \$800.00 for all the children, after which NCP shall be responsible for paying XX%, and CP shall be responsible for paying XX%, of the excess costs. "Uncovered medical expenses" means all medical expenses for the child(ren) not paid by insurance. "Medical expenses" shall include, but not be limited to, costs for reasonably necessary medical, orthodontia, dental treatment, physical therapy, eye care, including eye glasses or contact lenses, mental health treatment, substance abuse treatment, prescription drugs, and any other uncovered medical expense.

Shared Physical Care Custody Between Both Parents

Uncovered Medical Expenses: Pursuant to Rule 9.12(5), and without regard to the payment of any initial amounts, ONE shall be responsible for paying XX%, and TWO shall be responsible for paying XX%, of the child(ren)'s uncovered medical expenses. "Uncovered medical expenses" means all medical expenses for the child(ren) not paid by insurance. "Medical expenses" shall include, but not be limited to, costs for reasonably necessary medical, orthodontia, dental treatment, physical therapy, eye care, including eye glasses or contact lenses, mental health treatment, substance abuse treatment, prescription drugs, and any other uncovered medical expense.

DURATION OF CHILD SUPPORT AND MEDICAL SUPPORT LANGUAGE

Standard Duration Requirements of §598.1 Iowa Code

Duration of Child Support and Medical Support: The ongoing child support obligation and medical support obligation, including uncovered medical expenses, shall continue for the child(ren) until the child reaches the age of eighteen (18) years or becomes emancipated. If the child is engaged full-time in completing high school graduation or equivalency requirements, and the child is reasonably expected to complete said requirements before age nineteen (19), support shall continue until high school graduation or equivalency requirements are met.