

Local Rule 26

HEALTH CARE EXPENSES & INSURANCE FOR MINOR CHILDREN

26. (A) Unless otherwise specified, when the Court uses the term "extraordinary health care expenses" in domestic relations proceedings, it shall be construed as all necessary medical, dental, orthodontic, optical, hospital, and prescribed drug expenses in excess of \$100.00 per year per child.

26. (B) In accordance with the policy under the Child Support Guidelines, the residential parent shall pay the ordinary health care expenses, being defined as necessary medical, dental, orthodontic, optical, hospital and prescribed drug expenses not exceeding \$100.00 per year per child.

26. (C) If health care insurance is available to cover ordinary or extraordinary health care expenses to either of the parties through his/her employment at a reasonable cost to said party, that party shall apply for said medical insurance and each of the parties shall submit all medical, dental, optical, hospital, and prescribed drug expenses of the minor children to said medical insurers.

26. (D) Any extraordinary health care expenses which are uninsured, shall be paid by the respective parties in accordance with their respective percentages of the family income as said percentages are calculated on the Child Support Guideline Worksheets, to the closest ten percent.

26. (E) Either parent who has health care insurance available to him/her under this Rule, through his/her employment, shall supply the other parent with a medical insurance card and any other blank forms or other documentation needed to submit the medical expenses of the minor children to the insurance company.

26. (F) The responsibility for providing medical insurance remains with the parent or parents who have been ordered to provide medical insurance. However, that parent's obligation shall be deemed to have been met if that parent's current spouse or significant other has insurance through his or her employer that covers the children of the order. The parent who has the responsibility to provide medical insurance shall produce documentation satisfactory to the Court or Crawford

County Child Support Enforcement Agency of such insurance. When the Court or Agency is satisfied that the spouse or significant other of the parent who has the responsibility to provide medical insurance has the children of the order covered by his or her insurance, the Agency, subject to the Court's authority, will terminate or cancel any National Medical Support Notice (NMSN) that may have been issued to the employer of said parent.

In the event that such insurance is no longer available due to termination of employment, divorce, separation, cancellation, or other action, the parent who has the responsibility to provide medical insurance shall immediately notify the Agency. If such parent has medical insurance through his or her employer, the Agency shall immediately cause a NMSN to be issued to said employer.

26. (G) Unless the Court orders otherwise, the cost of insurance is deemed to be reasonable if the total cost of the insurance to the medical insurance obligor is 10% or less of the medical insurance obligor's gross income. The Court, in its discretion, may order insurance at a greater cost or decline to order insurance at a lesser cost depending on the availability of other insurance or medical benefits for the child or children, the totality of the circumstances of the parties, and the best interests of the child or children.

If the cost of medical insurance plus the child support plus the support orders issued in any other case exceed the Consumer Credit Protection Act (CCPA), the Court will not require the child support obligor to obtain medical insurance.

26. (H) All court or administrative orders will attach a copy of this Rule together with Local Rule 27.

(Revised October 14, 2003)