

# INSTRUCTIONS FOR COLLECTING UN-REIMBURSED MEDICALS THROUGH THE DOMESTIC RELATIONS OFFICE

## RESPONSIBILITIES OF THE CUSTODIAL PARENT

1. The Domestic Relations Office will help you collect the non-custodial parent's portion of un-reimbursed medical bills **once per calendar year** or when the amount due from the non-custodial parent is at least \$500.00 (above the first \$250.00 that is your responsibility per your Court Order) whichever comes first. Once you have met your \$250.00 obligation, you should be advising the other party **each time there is a medical expense** and how much of it is their responsibility. Give the other party a chance to pay-as-they-go.
2. Every year, you are responsible for the first \$250.00 of un-reimbursed medical bills for each child, whether the expenses occur when the child is in your care or the non-custodial parents care. Clients with governing support Orders dated before April 1, 1999, should refer to the addendum attached to their Order for specifics on un-reimbursed medicals.
3. You must prove to the Domestic Relations Office that you have paid \$250.00 out of your own pocket for each child before they will become involved in collecting from the other party. **UN-REIMBURSED MEDICALS DO NOT INCLUDE OVER THE COUNTER MEDICATIONS.**
4. **You must send the non-custodial parent copies of the medical bills no later than March 31 of the year following the calendar year the bills were incurred. However, you should send the non-custodial parent a copy of the medical bill and how much they are to pay each time a bill is incurred. If you submitted the bill to an insurance company a copy of their decision should also be sent.**
5. Reimbursement of medical expenses for which documentation is not provided to the non-custodial parent by March 31 of the following calendar year shall be within the discretion of the Court and may not be collected.

## GETTING DOMESTIC RELATIONS INVOLVED

1. Clip or staple together and **SAVE** the following for the Domestic Relations Office each time you have a medical expense:
  - a. A copy of the original bill(s). We will not accept just a statement with the balance.
  - b. A copy of the insurance determination as to what has/has not been covered by the insurance carrier.
  - c. A copy of the letter informing the other party of his/her amount to pay.
2. Fill out the enclosed form completely and list the date(s) of treatment in **CHRONOLOGICAL** order. If you have more than one child a separate form must be completed for each.
3. You must submit medical forms and bills to the Domestic Relations Office within six (6) months of the end of the calendar year. Reimbursement requests for years prior to the immediate past one may be scheduled for Family Court where a determination will be made as to whether or not the non-custodial parent is still responsible for payment.
4. It is strongly recommended that any elective procedures be thoroughly discussed with the other party **before** you begin treatment. Do not assume the Courts will make the non-custodial parent pay for procedures that cannot be proven to be medically necessary.

**DOMESTIC RELATIONS FOLLOW THROUGH AFTER SUBMISSION OF  
COMPLETED MEDICAL FORMS BY PETITIONER**

1. Forms will be reviewed for completeness and proof that you have paid your \$250.00 for each child. Bills and forms will be sent back to you if any of the required information is missing. You may resubmit them when all information is gathered.
2. The non-custodial parent will be notified by the Domestic Relations Office of the amount due for the year immediately past giving them thirty (30) days to pay you directly. The option will be given to the non-custodial parent to contact you within ten (10) days to make payment arrangements with you.
3. If the non-custodial parent fails to do either of the above, a case by case decision will be made either to add the amount to the arrearages and increase the income attachment or schedule a hearing on the matter before Family Court.