

ENFORCING A SUPPORT ORDER

Amending/Terminating/Replacing the Order to Enroll

CS 520.8

SUPERSEDES

CS 520.8 Amending/Terminating the Order to Enroll, February 6, 2014

REFERENCES

MCA §§ 40-5-208 and 40-5-801 through 40-5-825

Definitions

Affected Obligee: An obligee who is the custodian of one or more enforcement children in the case and who is not the enforcement parent.

Employment Related Insurance: The CSSD considers employer related insurance from Unions or *TRICARE to be employer insurance, references to employer or employer insurance should be read to include the employer related insurances mentioned above. In cases where the enforcement parent refuses to obtain health insurance from either of these, the CSSD can enforce the insurance requirement through a contempt or medical penalty action. Hardship determinations for employer related insurance should be treated in the same manner as those for ordinary employer insurance.

*TRICARE, formerly known as the Civilian Health and Medical Program of the Uniformed Services (CHAMPUS), provides civilian health benefits for military personnel, military retirees, and their dependents. Included under the TRICARE name is a number of options such as TRICARE Standard, TRICARE Prime and TRICARE Reserve Select (TRS). In addition, dental is offered through the TRICARE Dental Program (TDP). Details on all of the TRICARE options can be found on the [TRICARE website](#).

Parent: The enforcement parent who is the subject of the original Order to Enroll (OTE) action in CS 520.7 Enforcing Health Insurance Orders.

Policy

OTE Currently in Effect

The CSSD may amend, terminate, or replace an OTE **only** if the OTE is **currently in effect**. An OTE is considered currently in effect if the CSSD:

- Has not terminated the OTE
- Has not received a response to it indicating that the children cannot be enrolled
- Is not aware of any disenrollment action by the plan administrator based on alternative coverage provided by the parent
- Is not aware of any lapse in withholding that has resulted in a loss of coverage.

A lapse in withholding may be caused by termination of the parent's employment, by discontinuation of health insurance for all employees, by military activation of the parent, or by reduction in the parent's earnings to the extent that withholding is no longer possible under the limitations of the federal Consumer Credit Protection Act.

To obtain coverage for a child in a case where the original OTE listing the child is no longer in effect, the CSSD must issue a new OTE under the procedures in CS 520.7.

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Adding a Child to Coverage

To add a child to an OTE that is currently in effect in the case (for other children of the same biological unit), the CSSD must satisfy the same due process requirements as those in the original action. Specifically, the CSSD must serve and resolve notice of its intent to enroll the additional child, and must process any case facts concerning affordability, accessibility, and alternative coverage as in CS 520.7.

Disenrolling a Child from Coverage

The CSSD may order disenrollment of a child from existing coverage only if the CSSD is no longer enforcing medical support for the child through that employer/payor. For purposes of this section the CSSD is no longer enforcing medical support if:

- The child's subcase is being closed.
- The child has emancipated.
- The child has gone to live with a custodian for whom the CSSD has no authority to enforce medical support.
- There is another OTE currently in effect for the child with a different employer/payor, and the CSSD elects to maintain that other coverage.
- The parent has proved that the OTE was issued in error (for example, against the wrong person, or in the absence of a health insurance requirement), or that the insurance is geographically inaccessible, too expensive, or that there is alternative coverage for the child that was in place when the OTE was issued.
- The CP is requesting the CSSD terminate the OTE so, that Healthy Montana Kids (HMK) may be obtained. This ONLY applies when the OTE is in place with the CP's employer (and the CP is the enforcement parent). When terminating the OTE for this purpose, the CP has 30 days to enroll the child(ren) in HMK or medical support enforcement will resume. It is not appropriate to terminate an OTE that is in place with the NCP's employer for the purpose of obtaining HMK.

When ordering the disenrollment of a child, the CSSD instructs the employer/payor to determine first whether the parent wishes to continue enrollment and any necessary withholding on a voluntary basis. If so, the employer/payor continues to withhold and forward premiums, and informs the plan administrator of the new coverage status.

Other Changes to an Existing OTE

The CSSD amends an OTE whenever a child listed in the OTE changes custodians and the support order follows the child to the new custodian as in MCA § 40-5-290. The formal amendment action is necessary to ensure that the plan administrator provides the new custodian with information on access to coverage, as required by Montana law.

A formal amendment action (amended OTE) is not necessary when there is a change or correction to the child's personal information essential to maintaining coverage for that child. The change or correction of information may be conveyed through other means such as a phone call, letter, or fax. However, a detailed case note explaining how the change in information was relayed is required.

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Changes in OTE data relating to the parent or the child in the underlying support order do not require amendment of the OTE, but are accomplished by a letter to the employer/payor and the plan administrator. In the case of a change in the custodian's address, the CSSD relies on previous instructions to the custodian and the plan administrator to jointly update the custodian's address as necessary.

Terminating the OTE

The CSSD issues an Order to Terminate (OTT) enrollment only to disenroll all the children for whom coverage is currently in effect. There is no need for a termination order in cases where enrollment never occurred. Enrollment may not have occurred because the employer/payor did not offer dependent coverage, the parent was not eligible, premiums exceeded federal withholding limitations, or the Montana threshold for reasonable cost. Nor is a termination order required when enrollment has been discontinued by the plan administrator based on a lapse in withholding or proof of alternative coverage. Since an OTE is sent only to an employer/payor they are the only recipient of the OTT. **Do not** send an OTT to an obligor or obligee in the case.

Replacing the OTE

The CSSD replaces an OTE when a child listed in the existing OTE changes custodians and the support order follows the child to the new custodian as in MCA § 40-5-290. The replacement OTE is for the same parent-child pair as the existing OTE, so a new enrollment notice to the enforcement parent (the employee) is not required. However, if the employee parent was the child's custodian i.e., a parent obligee in the existing OTE and the child has now gone to live with a third-party custodian, the CSSD must wait to issue the replacement OTE until the new financial support obligation against the former obligee parent is established. The existing enrollment can remain in place based on the medical support obligation for the parent-child pair, which follows the child regardless of which case the pair is in.

If any child in the existing OTE remains with the same custodian, two replacement OTEs are required: one in the new case listing the child who has gone to live with the new custodian, and one in the existing case listing the child who has remained in the case.

In a replacement situation, the CSSD does not terminate the enrollment of the child who has moved to the new case. A cover letter to the employer and plan administrator simply notes the change in custodian and explains that the enrollment should remain in place. The formal replacement action is necessary to ensure that the plan administrator provides the new custodian with information on access to coverage, as required by Montana law.

Change in the Plan Administrator

If the CSSD learns of change in the plan administrator for health insurance a replacement OTE should be issued to ensure the new plan administrator provides the custodian with information on and access to the new insurance coverage, as required by Montana law.

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Procedures

1. **Conditions for Amendment, Termination, or Replacement.** Proceeds in this section for any child for whom 1) or 2) below applies; see POLICY for definition of OTE currently in effect:
 - 1) The CSSD wishes to add the child to an Order to Enroll (OTE) that is currently in effect for other children of the same biological unit in the same case, and the conditions for issuing an enrollment order for the child--given in CS 520.7--have been met. **Amend the OTE, step 2**
 - 2) The child is listed in an OTE that is currently in effect, and the CSSD wishes to take the following action:
 - Disenroll the child from the existing coverage, while allowing other children listed in the OTE to remain enrolled. See reasons for disenrollment in Policy above. **Amend the OTE, step 2**
 - Disenroll the child, along with all other children listed in the OTE, from the existing coverage. See reasons for disenrollment in Policy above. **Terminate the OTE, step 3**
(If other children are being added to the coverage at the same time, the CSSD must **amend** rather than terminate the OTE.)
 - Change the custodian listed in the OTE for the child, where the new custodian is in the same case. **Amend the OTE, step 2**
 - Change the custodian listed in the OTE for the child, where the new custodian is in a different (new) case. **Replace the OTE, step 4**
 - Change the plan administrator for the health insurance coverage. **Replace the OTE, step 4**

NOTE:

If it is necessary to change any other data listed in the OTE, amendment does not apply. A letter to the employer/payor and plan administrator may be required, see Policy above.

2. **Amending the OTE.** For all children identified for amendment action in step 1, amends the OTE by proceeding in steps 2a through 2e below. It is possible to amend the OTE for more than one purpose at the same time. For example, the amendment action may disenroll one child and add another.
 - a. Amended OTE package. Prepares an amended OTE package:
 - Form FED-MED amended National Medical Support Notice (NMSN)
 - CS 520.7M Order to Enroll Supplement
 - Except as provided in NOTE below, Acknowledgment of Receipt of Order(s) and Waiver of Service

NOTE:

If the Amended OTE is to be served electronically, the Acknowledgment of Receipt of Order(s) and Waiver of Service may be omitted. FED-MED and CS-520.7M are generated together on the OTD2 screen.

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In generating the amended OTE package, includes all the children identified in step 1, plus any children listed in the existing OTE for whom no changes in information, custodian, or coverage apply.

Follows instructions in CS 520.7, where applicable for creating a “short OTE”, generating and signing cover letters, checking for any domestic violence indicator, checking the NMSN for the correct underlying support orders, and obtaining the appropriate signature on the NMSN document.

AMENDED OTE PACKAGE: The amended NMSN will be accompanied by a special Amendment Instructions page preceding Part A and Part B of the updated document. The Amendment Instructions will explain what is being changed about the existing order (adding or disenrolling a child, changing a child's custodian), and will instruct the employer/payor and the plan administrator to replace the previously issued NMSN with the enclosed document. The new NMSN will list all the children who should now be enrolled in coverage, including children from the previous NMSN whose coverage is not being changed.

- b. Service of amended OTE. Arranges for service of the amended OTE package on the employer/payor as in CS 520.7 and updates the OTD screen for the service obtained.

EXCEPTION: If the amendment action is for the sole purpose of disenrolling one or more children, the package may be sent by regular mail.

- c. Notifications--Sends CS 510.b CP Action letter.
 - For any child being disenrolled by the amendment action sends CS 510.8B CP Action Letter, to the affected obligee by regular mail, informing the obligee the CSSD has terminated the enrollment order for the child. This version of the letter is generated automatically from the MID screen when the child is removed from the policy in step 2.e.
 - For any child whose custodian is being changed by the amendment action, prepares and sends CS 510.8B CP Action Letter, to the child's new custodian by regular mail, informing the obligee the CSSD has identified health insurance on the child. This version of the letter is generated by the caseworker from the MID screen. Also, prepares and sends CS 510.8B to the child's previous custodian, selecting the variable for medical enforcement discontinued.

CAUTION: In notifying an affected obligee of an amendment action, it is not appropriate to send a copy of the amended OTE.

- d. Response to amended OTE. For any child being added by the amendment action, monitors for response to the amended OTE, and proceeds as in CS 520.7. Disenrollment of a child or a change in the child's custodian does not require a response action by the employer/payor or plan administrator.
- e. System update. Updates the applicable medical screens for each child affected by the amendment action.

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- 3. Terminating the OTE.** For a termination action identified in step 1 proceeds in steps 3a through 3c below.

NOTE:

If any children are being added to or retained in the existing coverage, termination of the OTE is not appropriate.

- a. Order Terminating Enrollment Prepares form FED-MED, Order Terminating Enrollment (generated on the OTD1 screen). The document will automatically include all the children listed in the existing OTE.

Checks the document for accuracy and signs or obtains the supervisor's signature on Parts A and B.

ORDER TERMINATING ENROLLMENT DOCUMENT: The Order Terminating Enrollment operates similarly to the OTE, in that it includes a Part A to the employer/payor and a Part B to the plan administrator. However, the content of the document is unlike the OTE or the amended OTE; it briefly informs the employer/payor and the plan administrator that the case has changed since the most recent OTE was issued, and that the children should be disenrolled unless voluntary continuation of coverage applies. No response to Part A or Part B is required.

- b. Service/Notification Sends the original Order Terminating Enrollment (Part A and Part B) to the employer/payor by regular mail. The employer/payor will forward Part B to the plan administrator.

Sends to each affected obligee by regular mail CS-510.8B CP Action Letter, informing the obligee the CSSD has terminated the enrollment order. This version of the form is generated automatically from the MID screen when the children are removed from the policy or the policy is closed in step 3c.

CAUTION: In notifying an affected obligee of a terminating action it is not appropriate to send a copy of the OTT.

- c. System update Updates the applicable medical screens for each child listed in the termination order

- 4. Replacing the OTE.** For a replacement action identified in step 1 proceeds in steps 4a through 4g below. See the Medical Case Restructure tables and Global Rules at the end of this section for additional details. (The need for replacement action in this step is due to a change either in the plan administrator, or as a result of the CSSD's conversion to a new case structure, where each new obligee for children in the same biological unit created a new case against the same obligor.)

NOTE: Support Order Must Follow. Child. The procedures in this step (4) assume that when the child changes custodians against the same obligor, the support order "follows the child" under MCA § 40-5-290. If the order does not follow the child, procedures in CS 520.7 for loss of CSSD enrollment authority apply.

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- a. Replacement OTE package for a new custodian. In the case of a new custodian prepares an OTE package as in CS 520.7 for the new case, and ensures the existing OTE is inactivated. The new OTE document is generated as an original OTE and should automatically list the child with the new custodian.

NOTE:

Completion of the NID screen in the new case is required (in this step h). Additionally, prepares CS 520.8A Explanation of Change, stating the new OTE is replacing the existing OTE because the child has changed custodians, but the existing enrollment should remain in place.

- b. Additional OTE for replacement package. If any children are still residing with a custodian shown in the existing OTE, prepares an additional OTE in the “old” case (the case with the existing OTE) for those children, and includes the additional OTE in the package created in step 4.a. (The additional OTE is generated as an original OTE, not an amended OTE, and will be the same as the existing OTE in the case except that it will not list the child named in step 4.a.) The Explanation of Change letter generated in step 4.a explains that the children named in the second OTE in the package have not changed custodians. Note that this step (4.b) requires special coordination if the caseworkers for the “old” and “new” cases are different. The purpose of the second OTE in this step (4.b) is to provide the employer/plan administrator with accurate OTEs for all of the children from the existing (replaced) OTE.
- c. Possible delay for replacement against parent obligee. For the child who is changing custodians, if the custodian in the “old” case is also the employee in the existing OTE, it will be necessary to establish the support order against that parent in the new case before the replacement OTE can be generated. The existing enrollment can remain in place for the child until the establishment action is complete.
- d. Replacement OTE package for a new plan administrator. In the case of a new plan administrator issues a new OTE package as in CS 520.7 and ensures the existing OTE is inactivated. The new OTE document is generated as an original OTE. Additionally, prepares CS 520.8B Explanation of Change New Plan Administrator, stating the new OTE is replacing the existing OTE because there is a new plan administrator, but the existing enrollment should remain in place.
- e. Service of Replacement OTE. Arranges for service of the replacement OTE package on the employer/payor as in CS 520.7, and updates the applicable OTD screen(s) for the service obtained. Note that it is not appropriate to send the package by regular mail, as the CSSD must have proof of service of the order requiring the plan administrator to notify and provide information to the new custodian.

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- f. Notifications. Sends a copy of the signed replacement OTE package to the employee parent by regular mail.

For the child whose custodian is changing (step 4.a), prepares and sends to the child's new custodian by regular mail CS-510.8B CP Action Letter, informing the new custodian the CSSD has identified health insurance on the child. This version of the letter is generated automatically from the MID screen in the new case when the caseworker loads the insurance in step 4.h. Also, in the "old" case prepares and sends CS 510.8B to the child's previous custodian, selecting the variable for medical enforcement discontinued.

CAUTION: In notifying an affected obligee of a replacement action, it is not appropriate to send a copy of the replacement OTE(s).

- g. Response to replacement action. A replacement action does not require a response action by the employer/payor or by the plan administrator for a new custodian.

EXCEPTION: A response *is* required in a replacement action regarding a new plan administrator, see 4.d above.

- h. System update. Loads the MID screen with the updated information into the new case by copying the insurance information for the child from the "old" case. Note that while the policyholder will remain the same, the ATTRIBUTED TO role may change.

Completes the NID screen for the new case by copying the notice information for the parent-child pair from the old screen; references the old case (where the notice was resolved) in the COMMENT line. Note that completion of the NID screen will have been required for issuing the replacement OTE in step 4.a.

Updates the MID screen in the "old" case—the child who has changed custodians should be deselected on MID1, but history should remain on MID2.

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MEDICAL CASE RESTRUCTURE

In tables 1 through 4 assume: both parents have medical obligations; existing support order follows the child; no Indian Health Service (IHS)

All Children Move from Parent to Third-Party

Table 1

<i>CH01 moves from Mom to Grandma</i>	Case 1 (original) NCP = Dad CP = Mom (CH 01)	Case 2 (new) NCP = Dad CP = Grandma (CH 01)	Case 3 (new) NCP = Mom CP = Grandma (CH 01)
Case 1 Status	Action Required in Case 1	Action Required in Case 2	Action Required in Case 3
1. OTE against NCP Dad	Inactivate existing OTE; End MID record	Issue replacement OTE with Explanation of Change letter	<ul style="list-style-type: none"> • Establish support order with immediate enrollment language • Issue OTE if applicable (no alternative coverage, no previous OTE that failed)
2. OTE against CP Mom	<ul style="list-style-type: none"> • Coordinate w/case 3 to maintain coverage during establishment • Inactivate existing OTE; end MID record 	Issue NIE, or OTE if applicable (no alternative coverage, no previous OTE that failed)	<ul style="list-style-type: none"> • Coordinate w/Case 1 • Establish support order with immediate enrollment language • Issue replacement OTE with Explanation of Change letter

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MEDICAL CASE RESTRUCTURE

In tables 1 through 4 assume: both parents have medical obligations; existing support order follows the child; no Indian Health Service (IHS)

Some Children Move from Parent to Third-Party

Table 2

<i>CH 01 moves to Grandma CH 02 stays with Mom</i>	Case 1 (original) NCP = Dad CP = Mom (CH 01, CH 02)	Case 2 (new) NCP = Dad CP = Grandma (CH 01)	Case 3 (new) NCP = Mom CP = Grandma (CH 01)
Case 1 Status	Action Required in Case 1	Action Required in Case 2	Action Required in Case 3
1. OTE against NCP Dad	<ul style="list-style-type: none"> • Coordinate with Case 2 • Inactivate existing OTE for CH 01 & CH 02 • Issue Replacement OTE for CH 02; Update MID screen record 	<ul style="list-style-type: none"> • Coordinate w/Case 1 • Issue replacement OTE for CH01 with Explanation of Change letter; package to employer includes two replacement OTEs (Cases 1 and 2) 	<ul style="list-style-type: none"> • Establish support order with immediate enrollment language • Issue OTE if applicable (no alternative coverage, no previous OTE that failed)
2. OTE against CP Mom	<ul style="list-style-type: none"> • Coordinate with Case 3 to maintain coverage during establishment • Inactive existing OTE (CH 01/02) • Issue replacement OTE for CH 02; Update MID screen record 	Issue NIE, or OTE if applicable (no alternative coverage, no previous OTE that failed)	<ul style="list-style-type: none"> • Coordinate with Case 1 • Establish support order with immediate enrollment language • Issue Replacement OTE, CH01 with immediate enrollment language, Explanation of Change Letter, package to employer includes two Replacement OTEs (Cases 1 and 3)

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MEDICAL CASE RESTRUCTURE

In Tables 1 through 4, assume both parents have med obligations; existing support order follows the child; no Indian Health Service (IHS) eligibility. In Tables 3 and 4, assume medical obligations for both parents are in same order; if not, case 3 only enforceable against Dad.

All Children Move from Third-Party to Parent

Table 3

<i>Case 1(original)</i> NCP = Dad CP= GPAR, CH 01	<i>CASE 2 (original)</i> NCP = Mom CP = GPAR, CH 01	CH 01 moves from Grandma to Mom	Case 3 (new) NCP = Dad CP = Mom (CH 01)
Status at the time of change in CP		Action Required in Cases 1 & 2	Action Required in Case 3
1. OTE against NCP Dad	No OTE	Inactivate Dad’s OTE, End Dad’s MID screen record (Case 1)	Issue replacement OTE against Dad with Explanation of Change letter
2. No OTE	OTE against CP Mom	Inactivate Mom’s OTE, End Mom’s MID screen record (Case2)	Issue replacement OTE against Mom with Explanation of Change letter
3. OTE against NCP Dad	OTE against CP Mom	Inactivate both OTEs, End both MID screen records (Cases 1 & 2)	Issue Replacement OTE package against Dad with Explanation of Change letter; Issue Replacement OTE package against Mom with Explanation of Change letter

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MEDICAL CASE RESTRUCTURE

In Tables 1 through 4, assume both parents have med obligations; existing support order follows the child; no Indian Health Service (IHS) eligibility. In Tables 3 and 4, assume medical obligations for both parents are in same order; if not, case 3 only enforceable against Dad.

Some Children Move from Third-Party to Parent

Table 4

<i>Case 1(original)</i> NCP = Dad CP= GPAR, CH 01/02	<i>CASE 2 (original)</i> NCP = Mom CP = GPAR, CH 01/02	CH 01 moves from Grandma to Mom CH 02 stays with Grandma	Case 3 (new) NCP = Dad CP = Mom (CH 01)
Status at the time of change in CP		Action Required in Cases 1 & 2	Action Required in Case 3
1. OTE against NCP Dad	No OTE	Case 1-Coordinate with Case 3; Inactivate OTE; Issue Replacement OTE for CH02, Update MID screen record Case 2-Enforce medical for CH02	<ul style="list-style-type: none"> • Coordinate with Case 1 • Issue Replacement OTE against Dad + CH 01 with Explanation of Change letter; Send package to employer = two Replacement OTEs for Cases 1 & 3
2. No OTE	OTE against CP Mom	Case 1-Enforce medical for CH 02 Case 2-Coordination with Case 3; Inactivate OTE; Issue Replacement OTE for CH 02; Update MID screen record	<ul style="list-style-type: none"> • Coordinate with Case 2 • Issue Replacement OTE against Mom = CH 01 with Explanation of Change letter; Send package to employer = two Replacement OTEs for Cases 2 & 3
3. OTE against NCP Dad	OTE against CP Mom	Cases 1 & 2-Coordinate with case 3; Inactivate OTEs; Issue Replacement OTEs for CH 02; Update MID records	For EACH parent: Coordinate with the original case; Issue Replacement OTE for CH 01 with Explanation of Change letter; Send package to employer = two Replacement OTEs involving cases 1 &3 or 2 & 3

GLOBAL RULES FOR MEDICAL CASE RESTRUCTURE

A change in CP which creates a new case

1. **CHECK FOR OTHER CASE** Before enforcement in a new third-party case, and also before establishment if applicable, always check for medical enforcement in another case for this parent-child pair.
2. **LOAD ANY AND ALL INSURANCE** Regardless of the enforcement status of the new case, always load any known insurance for the child.
3. **TRANSFER MEDICAL INFORMATION** For any medical enforcement information found on NIS and MEC in another case for the same parent-child pair, always transfer the information to the new case when the new case reaches enforcement.
4. **PREVIOUSLY FAILED OTE** If an OTE failed for the same parent-child pair in another case, it is not necessary to reissue the OTE in the new case if the failure was recent or still applies.
5. **MAINTAIN COVERAGE** When the new case is in establishment, and there is an OTE in place in another case for the same parent-child pair, coordinate the cases to keep coverage in place during financial establishment in the new case. (Both caseworkers have a duty to coordinate.)
6. **GOLDEN RULE:** Make sure the employer always has the correct OTE(s) (correct custodian and case number) on file for any parent-child pair. (Incorrect OTEs must be replaced.)

Related Existing Rules

1. **WHEN ORDER DOES NOT FOLLOW CHILD** For case restructure as well as "old" multiple-CP cases, always terminate enrollment immediately if the order does not follow the child to the new custodian.
2. **THIRD-PARTY RULES** For cases involving a change of custodian within the same case, continue to use the Third-Party Rules in CS 520.3 Reviewing Health Insurance Orders.