Employers and the Office of the Attorney General
Partnering Together

More than 1.68 million Texas children are being raised by a single mom or dad. In most instances, the other parent is obligated by court order to provide financial and medical support to the parent with primary custody. By deducting child support from employee paychecks, Texas employers play a key role in improving the economic security of children who rely on child support to cover many of their basic needs.

The Child Support Division of the Attorney General’s Office is authorized by state and federal law to assist families in establishing, enforcing and modifying child and medical support orders; and in collecting and distributing child support payments. For the state fiscal year that ended Aug. 31, 2014, the Child Support Division served more than 1.4 million families and collected a record-breaking $3.8 billion in child support.

Achieving that milestone would not have been possible without the help of Texas employers. Money that employers withheld from employee paychecks accounted for 78 percent of the $3.8 billion collected. In addition, employers responded to 140,925 National Medical Support Notices. With the help of employers, 193,516 children on the child support caseload were enrolled in employer sponsored health plans.

The Employer Handbook was created specifically for employers. It is our hope that this handbook will ease the administrative burden placed on employers to fulfill their child support duties.

The handbook covers a variety of online services and tools to make it easier to comply with legal requirements that govern employers’ child support responsibilities. Employers who have taken advantage of our online services and tools report little or no significant costs to their operations.

Thank you for partnering with the Office of the Attorney General to serve the children and families of Texas.

Sincerely,

Office of the Attorney General of Texas
Title IV-D Agency
This handbook was created by the Child Support Division’s Employer Services. It is designed to provide employers with necessary information to meet their child support responsibilities.

For questions or assistance, contact the OAG Employer Call Center at (800) 850-6442 or visit the website:

www.employer.texasattorneygeneral.gov
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Chapter I: Introduction

History of the Child Support Program

In 1975, the United States Congress added Part D to Title IV of the Social Security Act. The purpose of this newly enacted Title IV-D federal-state partnership was to promote the collection of child support payments throughout the country. This law required all states providing Aid to Families with Dependent Children (AFDC) to create a complementary program for the enforcement of child support. Each state’s IV-D program was to be responsible for the establishment and enforcement of child support orders in AFDC cases. The focus of the IV-D program at its inception was limited to cost recovery: to collect child support assigned to the state by the custodial parent as a condition of the family receiving AFDC cash assistance. To meet this new federal mandate, the Texas Legislature designated the Texas Department of Human Services as the state’s Title IV-D agency. In 1983, the Texas Legislature shifted responsibility to the Office of the Attorney General (OAG).

In 1984, the U.S. Congress amended the IV-D program to require that each state enact laws requiring mandatory income withholding in child support cases. For cases receiving child support services from the state’s IV-D agency, states were tasked with seeking health insurance coverage for children if available at a reasonable cost to the noncustodial parent. This year marked the expansion of IV-D child support services to both welfare and non-welfare families.

The Family Support Act of 1988 amended the program to require that each state have procedures under which every three years, upon request of the custodial parent or noncustodial parent, the state will review whether the child support order should be modified, either upward or downward. Factors considered during this review include changes in income and the availability of dependent health insurance.

In 1996, Congress performed a major overhaul of the welfare system under the Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA), which ended the decades-old AFDC entitlement program. In its place, Congress created a time-limited cash assistance program, Temporary Assistance for Needy Families (TANF). The intent of the PRWORA legislation was to promote self-sufficiency of the family and end welfare dependence. Emphasis continued to be placed on improving collection of child support to assist families both those on welfare so that they would no longer need public assistance and families not on welfare but perhaps struggling to stay off public assistance.
Among its many child support program enhancements, PRWORA mandated that every state establish a centralized state disbursement unit. It further required that all child support paid on cases being enforced by the IV-D agency (so-called “full-service” IV-D cases) and on non IV-D cases with orders rendered on or after Jan. 1, 1994 (so-called “registry only” cases), be paid through the state disbursement unit.

PRWORA amendments to the IV-D statutes also established a National Directory of New Hires (NDNH) to track delinquent parents across state lines by requiring employers to report information on all new hires to state agencies for transmittal to the NDNH.

The Child Support Performance and Incentive Act (CSPIA) of 1998 amended the IV-D statutes and the federal Employee Retirement Income Security Act (ERISA) to ensure that children were timely enrolled under a parent’s health care plan. Under the CSPIA amendments, an appropriately completed National Medical Support Notice was deemed to be a qualified medical child support order (QMCSO) under ERISA.

In 2006, Congress again amended the IV-D statutes to require states to seek dependent health insurance from whichever parent, the custodial parent or the noncustodial parent, is best able to provide medical coverage.

As the IV-D agency for the state of Texas, the OAG provides services for parents who wish to obtain or provide support for their children. The OAG’s Child Support Division (OAG-CSD) provides the following child support services:

- Locating parents
- Establishing paternity for children
- Establishing, modifying and enforcing child support obligations
- Establishing and enforcing medical support obligations
- Collecting, distributing and disbursing child support monies

To successfully perform these functions, OAG-CSD relies on employers to comply with their legal responsibilities.
Employer Responsibilities in the Child Support Program

Employers have child support responsibilities in seven broad areas:

- Report employee new hires and rehires
- Comply with requests for verification of employment
- Comply with National Medical Support Notice requirements
- Withhold income (garnishments)
- Submit mandated payments (including lump sum and severance pay)
- Notify the OAG-CSD before issuing lump sums
- Report terminated employees with income withholding orders from OAG-CSD
Chapter II: Employer New Hire Reporting

General Information

Employer New Hire Reporting is mandated by federal law under the Personal Responsibility and Work Opportunity Reconciliation Act of 1996, and requires employers to report new hires and rehires within 20 calendar days. Information received from employers is entered into a statewide registry and then transmitted to the National Directory of New Hires. Reporting information concerning newly hired and rehired employees to a centralized state database also assists the Child Support Division in locating and collecting child support from absent parents. [TFC § 234.102].

On Oct. 21, 2011, President Obama signed the Trade Adjustment Assistance Extension Act of 2011, which amended section 453A(a)(2) of the Social Security Act effective April 21, 2012, to include a definition of newly hired employee as an employee who:

- Has not previously been employed by the employer or
- Was previously employed by the employer but has been separated from such prior employment for at least 60 consecutive days

The Office of the Attorney General’s Child Support Division (OAG-CSD) uses new hire information to:

- Locate parents who owe child support
- Establish new child support orders
- Issue income withholding orders
- Enforce and modify existing orders

**New hire reporting is not the same as quarterly wage reporting.** Quarterly wage data reported to the Texas Workforce Commission (TWC) are similar to new hire information that is reported to the OAG-CSD. However, quarterly wage reporting does not substitute for new hire reporting, which is a separate employer responsibility.

Multistate Employers

A multistate employer is defined as an employer who hires and employs people in two or more states. Multistate employers who conduct business within each state must report its employees to
the states where they work. If an employer has employees in more than one state, the employer has the option to report all new hires to one state.

Multistate employers may select one of the following reporting options:

- Report newly hired employees to the various states in which they work by following the New Hire Reporting Program regulations, requirements and time frames of each state or

- Select one state where employees are working and report all new hires to that state's designated new hire reporting office

A multistate employer who chooses to report to one state must:

- Submit new hire reports electronically
- Notify the Office of Child Support Enforcement (OCSE) in writing of the state to which the employer will report new hires and all Federal Employer Identification Numbers (FEINs)

To learn more information on multistate employers, visit the Office of Child Support Enforcement website. To register as a multistate employer, complete the Multistate Employer Notification Form available in this handbook or download the form. The form also can be found in the Sample Forms section of this chapter.

Benefits of Reporting

Employers who submit information on their newly hired employees to the Employer New Hire Reporting Program benefit businesses, children and taxpayers by:

- Preventing fraudulent public assistance, workers’ compensation and unemployment benefit claims
- Providing early detection of overpayments, resulting in substantial savings to the Unemployment Insurance Trust Fund (UITF)
- Returning overpayments recovered by Texas Workforce Commission to the UITF, which results in lower unemployment taxes
- Reducing employment information requests from the OAG-CSD
- Assisting the OAG-CSD in locating noncustodial and custodial parents
- Allowing the OAG-CSD to enforce child support orders quickly by issuing Income Withholding Orders/Notices
- Allowing child support payments to reach families more quickly
What to Report

Seven required elements to be reported:

1. Employer name – Associated with the Federal Employer Identification Number
2. Employer mailing address – If different from payroll address, provide payroll address associated with the FEIN entity that employs the individual
3. Company FEIN – Nine-digit number assigned to the employer by the Internal Revenue Service
4. Employee name – Full name associated with that employee's Social Security number
5. Employee address – Current residential address of the new employee
6. Employee Social Security number – Nine-digit Social Security number assigned to the employee by the Social Security Administration. Individual taxpayer identification numbers (ITINs) cannot be used as a substitute for Social Security numbers.
7. Employee date of hire – The first day services are performed for pay by an individual

To reduce the number of OAG-CSD requests for employment information, employers may choose to report optional data, such as:

- Employee’s date of birth
- Salary/wages
- Pay frequency
- State of hire
- Employer’s phone, fax number and name of a contact person
- State Employer Identification Number (SEIN) used by TWC to cross match with quarterly wage information

✓ Note: The OAG-CSD administers the Employer New Hire Reporting Operations Center through a vendor to process various forms to include new hire reporting, verification of employment and terminations.

Reporting Time Frames

New hires must be reported within 20 calendar days of hire date, if reported by non-electronic means. If reported electronically, new hires must be reported by two monthly transmissions (if necessary), not less than 12 days nor more than 16 days apart. [42 U.S.C. 653a (b) (2); 1 TAC § 55.303]
State law provides a penalty of $25 for each employee an employer knowingly fails to report, and a penalty of $500 for conspiring with an employee to fail to file a report or to submit a false or incomplete report. [TFC § 234.105]

Reporting Methods

New hire information may be reported several ways. Choose the most convenient option from the following:

- **Online** – Submission is through the [Texas Employer Website](#).
- **Data Transfer System (DTS)** – Files are uploaded using the Excel spreadsheet (XLS) or text record format (TXT) available through the [Texas Employer Website](#).
- **File Transfer Protocol (FTP)** – Contact the Employer Call Center at (800) 850-6442 to request technical assistance in implementing the FTP process. Utilizing the FTP process requires the use of TXT file layout as described on the [Texas Employer Website](#).
- **Mail** hardcopy of FormW-4 (with the date of hire written on the bottom of the form), a printed list or the Employer New Hire Reporting form to:
  - ENHR Operations Center
  - P.O. Box 149224
  - Austin, TX  78714-9224
- **Fax** a hardcopy of Form W-4 (with the date of hire written on the bottom of the form), a printed list or the Employer New Hire Reporting form to (800) 732-5015.
- **Telephone** – (800) 850-6442

Benefits of Reporting Electronically

Reporting new hires electronically benefits employers in many ways:

- Reduces paper
- Improves the quality of data submitted
- Provides the capability to immediately print and/or view a history of records submitted for that day
- Provides the capability to view a complete 90-day history of records submitted
- Allows employers with multiple locations to centralize reporting
- Helps avoid requests for additional information due to unreadable or missing data
Procedures for reporting online, creating a file to transfer via FTP and uploading files using the data transfer system are provided on the website.

Obtaining a History of Submitted Records

There are two ways to obtain a history:

- If records are submitted manually, employers may request a 90-day history by email.
- If records are submitted online, use the feature “View Today’s Activity” that displays all records entered that day. If more than eight hours have passed, an employer may request a 90-day history by selecting “View 90-day History.” Employers must be prepared to provide the company name and FEIN.

Sample Forms

The following forms can be found at the end of this chapter:

- Texas Employer New Hire Reporting Form (with instructions)
- Multistate Employer Notification Form for New Hire (W4) Reporting (with instructions)
- Electronic Reporting Specifications
- TXT File Layout
Reporting New Hires

It’s not just good business. It’s the law!

REMINDERS

✓ New hire reporting is **not** the same as quarterly wage reporting.

✓ New hires must be reported to the ENHR Operations Center within 20 days of hire.

✓ Quarterly wages must be reported to TWC within 30 days after the end of the quarter.
Frequently Asked Questions

1. Who is exempt from reporting to National Directory of New Hires (NDNH)?

   Federal agencies that are classified in nature may choose not to report certain individuals performing intelligence or counter-intelligence functions, if reporting could endanger the safety of the employee or compromise an investigation or intelligence mission. The Federal Parent Locate Service (FPLS) may request employment information for a specific noncustodial parent directly from these agencies, at a state’s request.

2. Are there penalties for employers who do not report new hires?

   To be in compliance, employers must provide all required information within 20 calendar days of the employee’s first day of work. State law provides a penalty of $25 for each employee an employer knowingly fails to report and a penalty of $500 for conspiring with an employee to fail to file a report or submit a false or incomplete report.

3. What is the definition of “employer” for new hire reporting purposes?

   The term “employer” means the person for whom an individual (the employee of such person) performs or performed any service, of whatever nature. An employer also includes any governmental entity and any labor organization. [42 U.S.C. § 653a(a)(2)(B)] [26 USC § 3401(d)]

   At a minimum, in any case where an employer is required to give an employee a Form W–2 showing the amount of taxes withheld, the employer must meet the new hire reporting requirements.

4. What is the definition of “employee” for new hire reporting purposes?

   An employee for the purpose of new hire reporting is an individual who is an employee for purposes of federal income tax withholding from wages. [42 USC § 653a(a)(2)(A)] [26 USC § 3401(c)]

5. My company has never reported new hires. What should we do?

   Begin by reporting any new employees you have hired within the last 90 days. Continue by reporting any new hires or rehires within 20 days of their hire date, if reported by non-
6. Should new hire information be reported on a person who has been hired and is in training or a probationary period?

Yes. If a person has been hired and a legal employee-employer relationship exists, a report must be filed. The probationary nature of the employment does not negate the need to report.

7. What is considered to be the date of hire?

The date of hire is the first day services are performed for pay by an individual.

8. Must an employer report an employee who is being rehired or recalled from a layoff, or who is returning from a leave of absence?

If a returning employee is required to submit a Form W-4 to the employer, the employer is required to furnish a new hire report to the State Directory of New Hires.

9. Are temporary employment agencies, union halls, and placement services that refer individuals for work to third party employers required to report the employee as a new hire?

Yes, if a legal relationship exists between the employer and employee. If the agency, union hall, etc., is paying wages to the individual, a new hire report must be submitted. The individual needs to be reported only once unless there is a break in service and a new Form W-4 is required to begin work. If the company simply refers individuals for employment and does not pay salaries or wages, new hire reports are not necessary because the employer who actually hires and pays the employee will be required to report the new hire information. [26 USC §§ 3401-3406]

10. What about independent contractors and new hire reporting?

It’s important to understand each state’s laws with regards to new hire reporting. Texas recently defined “employee” for the purpose of new hire reporting to include individuals hired as independent contractors.

11. My company does not have employees who pay child support. Why report them?
Federal and state law require employers to report all newly hired or rehired employees to the designated New Hire Reporting Program, whether or not the employer believes that a given employee owes child support. This information is compared with the names of child support obligors and recipients of public benefits for the purpose of improving child support collections and detecting fraud or abuse of public benefits programs.

12. Why should the employer’s State Employer Identification Number (SEIN) be reported?

Employers are only required to report the Federal Employer Identification Number (FEIN). The SEIN is not a required element to report. However, the Texas Workforce Commission (TWC) uses the SEIN to cross match with its quarterly wage information.

13. Why is the payroll address needed?

The majority of collections are received via income withholding. The correct payroll address ensures the income withholding order goes to the correct location.

14. Where should the payroll address be submitted?

The OAG-CSD needs your Federal Employer Identification Number (FEIN) address and the address for sending income withholding orders/notices. Submit changes to your payroll address via one of the following means:

- By contacting the Employer Call Center at (800) 850-6442
- Texas Employer Website – log in and click [Update Your Company Information]

15. Are employers that reorganize and merge under a new Federal Employer Identification Number (FEIN) required to file new hire report on employees acquired as a result of the merger?

No.

16. Explain the term “multistate employer.”

Employers with employees working in two or more states are considered multistate employers for new hire reporting purposes. Once an employer registers as a multistate employer, the employer may:
17. May the parent company with subsidiary companies in multiple states report to a single state?

Yes, an employer with employees in two or more states may choose to designate one state to report all new hires. The Department of Health and Human Services must be notified in writing of the designated state. [42 USC § 653a(b)(1)(B)]

18. Can a multistate employer designate more than one state in which to report? Can a company opt to report most new hires to one central location but continue to have some local offices report to individual states?

The answer is no to both questions. Multistate employers must designate a single state or report to each state individually.

19. How can an employer obtain a history of new hire records submitted?

There are two ways to obtain a history. Employers who submit records online may view the history online. The application has a feature entitled “View Today’s Activity” that displays all records entered on the current day. If more than eight hours have passed, an employer may request a 90-day history by selecting “View 90-day History.” Employers must be prepared to provide the company name and Federal Employer Identification Number (FEIN).

If records were submitted manually, employers may request a 90-day history by sending an email. Be sure to include the company name and FEIN.

20. Can an employee’s Individual Taxpayer Identification Number (ITIN) be reported on the Texas State New Hire Report?

No. Only a Social Security number (SSN) can be reported to the State Directory of New Hires. An ITIN is a tax processing number issued by the Internal Revenue Service (IRS). It is a nine-digit number that always begins with the number nine and has a seven or eight as the fourth digit (example 9XX-7X-XXXX). IRS issues ITINs to individuals who are required to have a U.S. taxpayer identification number but do not have, and are not eligible to obtain, an
SSN from the Social Security Administration (SSA). ITINs are for federal tax reporting purposes only and should not be used for any other purpose. An ITIN does not authorize work in the U.S. or provide eligibility for Social Security benefits and is not valid identification outside the tax system. IRS issues ITINs to help individuals comply with U.S. tax laws, and to efficiently process and account for tax returns and payments for those ineligible for SSNs. Additional information on the use of ITINs should be directed to IRS and/or the SSA.

21. How can one obtain more information about employer new hire reporting other than using the website?

Contact the OAG-CSD using any of the following methods:
  • Call: (800) 850-6442, Monday through Friday, 8 a.m. – 6 p.m. Central Time
  • Write: ENHR Operations Center, P.O. Box 149224, Austin, TX  78714
Texas Employer New Hire Reporting Form

Submit within 20 calendar days of new employees first day on board:
X-20HR Operations Center, P.O. Box 149324
Austin, TX 78714-0324
Phone: 1-800-359-6982  FAX: 1-800-732-5615
Online: www.employertax.legis.state.tx.us

To ensure the highest level of accuracy, please print neatly in capital letters and avoid contact with the edges of the paper. The following will serve as an example:

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### Employer Information

1. Federal Employer ID Number (EIN):
   - Please use the same EIN throughout in quarterly wage reports.

2. Employer ID Number (Optional):

3. Employer Name:

4. Employer Address (Please indicate the address where the Income Withholding Orders should be sent):

5. Employer City (US):


7. ZIP Code (US):

8. Province/Region (of foreign):

9. Country (of foreign):

10. Postal Code (of foreign):

11. Employer Telephone (Optional):

12. Employer FAX (Optional):

13. New Hire Contact Person (Optional):

### Employee Information

14. Social Security Number (SSN):

15. Date of Hire (MM/DD/YYYY):

16. Employee First Name:

17. Employee Middle Name:

18. Employee Last Name:

19. Employee Home Address:

20. Employee City (US):


22. ZIP Code (US):

23. Province/Region (of foreign):

24. Country (of foreign):

25. Postal Code (of foreign):

26. State Where Employee Was Hired (Optional):

27. Employee DOB (MM/DD/YYYY) (Optional):

28. Employee’s Salary (Dollars and Cents) (Optional):

29. Salary Frequency (Check One ONLY) (Optional):
   - Hourly
   - Weekly
   - Biweekly
   - Semi-Monthly
   - Monthly
   - Annually

REV 1/2013
INSTRUCTIONS FOR COMPLETING THE TEXAS EMPLOYER NEW HIRE REPORTING FORM

The purpose of the Texas New Hire Reporting Form is to allow employers to fulfill new hire reporting requirements. You may enter your employee information and photocopy a supply and then enter employee information on the copy.

REPORTING OF NEW HIRES IS REQUIRED:

All required items (numbers 1, 3, 4, 6, 7, 14, 16, 17, 18, 20, 21, 22) on the form must be completed.

Box 1: Federal Employer ID Number (FEIN). Provide the 9 digit employer identification number that the federal government assigns to the employer. This is the same number you use in federal tax reporting. Please use the same FEIN that appears on quarterly wage reports.

Box 2: State Employer ID Number (Optional). Identification number assigned to the employer by the Texas Workforce Commission.

Box 3: Employer Name. The employer name as listed on the employee’s W-4 form. Please do not provide more than one employer name (for example, “ABC, Inc” vs. “John Doe Paint and Body Shop” is incorrect).

Box 4: Employer Address. Please indicate the address where the Income Withholding Orders should be sent. Do not provide more than one address (for example, P.O. Box 123, 1345 Main St. is correct).

Box 5: Employer Province/Region (if foreign). Provide this information if the employer address is not in the United States.

Box 6: Employer Country (if foreign). Provide the two letter country abbreviation if the employer address is not in the United States.

Box 10: Postal Code (if foreign). Provide the postal code if the employer address is not in the United States.

Box 13: New Hire Contact Person (Optional). Providing the name of a contact person will facilitate communication between the employer and the Texas Employer New Hire Reporting Program.

Box 15: Date of Hire. List the date in month, day, and year order. Use four digits for the year (for example, 2004). This should be the first day that services are performed for wages by an individual. If you are reporting a rehire where a new W-4 is prepared, use the return date, not the original hire date.

Box 22: Employee Social Security Number (Optional). The social security number must be entered in Box 22.

Box 23: Employee Name. The name as listed on the employee’s W-4 form. Please do not provide more than one name (for example, “John Smith” vs. “John Smith, Jr.” is incorrect).

Box 24: Employee Date of Birth (Optional). List the date in month, day, and year order. Use four digits for the year (for example, 1988).

Box 25: Employee Address. Please indicate the address where the Income Withholding Orders should be sent. Do not provide more than one address (for example, P.O. Box 123, 1345 Main St. is correct).

Box 26: Employee Province/Region (if foreign). Provide this information if the employee does not reside in the United States.

Box 27: Employee Country (if foreign). Provide the two letter country abbreviation if the employee address is not in the United States.

Box 28: Employee Date of Hire (Optional). List the date in month, day, and year order. Use four digits for the year (for example, 1988).

Box 29: Employee Social Security Number (Optional). The social security number must be entered in Box 22.

SUBMISSION OF NEW HIRE REPORTS. The Texas Employer New Hire Reporting Program offers a variety of methods that employers can use to submit new hire reports. For further information on which method may be best for you, call 1-800-950-8492. Employers are encouraged to keep photocopies or electronic records of all reports submitted. When the form is completed, send it to the Texas Employer New Hire Reporting Program using one of the following means:

- FAX: 1-800-732-6016
- U.S. Mail:
  6111 Guadalupe Street
  Austin, TX 78751
- Telephone Submissions: 1-800-950-8492
- Internet Submissions: www.texasattorneygeneral.gov

Employers must provide all of the required information within 20 calendar days of the employee’s first day of work to begin compliance. State law provides a penalty of $250 for each employee an employer knowingly fails to report, and a penalty of $500 for complying with an employee’s 1) failure to file a report or 2) submitting a stale or incomplete report.

REV 12/20  ENHR RPT FORM

23
MULTISTATE EMPLOYER NOTIFICATION FORM
FOR NEW HIRED (W4) REPORTING

This form is provided to employers who have employees in two or more states and wish to register to submit their new hire reports to one state or to make changes to their previous registration.

Federal law requires employers to provide to the State Directory of New Hires of the state in which a newly hired employee works, a report that contains the employee’s name, address, Social Security number, and the date of hire (the date services for remuneration were first performed by the employee) as well as the employer’s name, address and Federal Employer Identification Number (FEIN) (42 USC 653A(b)(1)(A)).

If you are an employer with employees in two or more states AND you will transmit the required reports magnetically or electronically, Federal law allows you to comply with the new hire reporting requirement by exercising one of the following options (42 USC 653A(b)(1)(B)):

Option #1: Send the new hire reports to the State Directory of New Hires of the state in which each newly hired employee works.

OR

Option #2: Designate one state in which any employee works and transmit ALL new hire reports to the State Directory of New Hires of that state. You must notify the Secretary of the U.S. Department of Health and Human Services (in writing) of your choice to report to only one state and identify the chosen state (42 USC 653A(b)(1)(B)).

For Option #2: Complete this form to identify/register your entity as a multistate employer for new hire reporting.

If you are no longer a multistate employer — OR — you are a multistate employer but you no longer report to one state, check “No Longer a Multistate Employer” in the box below. Complete Items 1 – 5, provide your contact information in Item 10, and mail or fax this form to the address or fax number located on the last page.

☐ No Longer a Multistate Employer — (If checked, complete Items 1 – 5 and Item 10 and return the form to the address or fax number located on the last page.)

For assistance in completing this form, call the Multistate Employer Help Desk at 410-277-9470 (8:00 a.m. – 5:00 p.m. ET). If you wish to register electronically, go to: https://oess.acf.hhs.gov/OCESE/

1. Print your company’s Federal Employer Identification Number. This is the nine-digit number used by the IRS to identify your company.

   Federal Employer Identification Number (FEIN): ____________________________________________________________________________ Date __ / __ / __________

2. Print today’s date in MM/DD/YYYY format, e.g., 06/23/2013.

3. Print your company’s name. This is the name associated with the FEIN in Item 1.

   Employer Name: ____________________________________________________________________________
4. PRINT your company's address, including city, state, and zip code. This is the address associated with the FEIN in Item 1. If your company's FEIN address is a foreign address, PRINT the Country Name and the Country's Postal Code.

   Employer Address:
   ________________________________
   ________________________________
   ________________________________

   City: __________________ State: ______ Zip Code: ______
(For foreign addresses only)  Country Name: ____________Country Postal Code: ____________

5. Print your company's phone number, including area code. This is the phone number associated with the FEIN in Item 1.

   Phone Number:  (____)______________ Ext. ________________

6. Print the FEIN, name, state, and zip code of any subsidiary of your company that has its own FEIN and for which you will be reporting New Hire information.

   Subsidiary Information: (Please list any additional subsidiaries on a separate sheet.)

   FEIN: __________________________ FEIN: __________________________
   Name: __________________________ Name: __________________________
   State/Zip Code: __________________ State/Zip Code: __________________

   FEIN: __________________________ FEIN: __________________________
   Name: __________________________ Name: __________________________
   State/Zip Code: __________________ State/Zip Code: __________________

7. Print the two-character abbreviation for the State or U.S. Territory to which your company has chosen to report new hire information. NOTE: The State that you designate must be a State in which you have one or more employees. Refer to the state listing shown in Item 9.

   __________

8. Enter the effective date (MM/DD/YYYY) on which your company will begin sending new hire (W-4) reports to the entity shown in Item 7.

   Effective Date: __ / __ / __________
9. Please circle the States or U.S. Territories in which your company has employees, other than the State or Territory selected as your reporting State in Item 7. You must indicate at least one State in this list to register as a multisate employer.

**DO NOT INCLUDE THE STATE CODE ENTERED IN ITEM 7**

<table>
<thead>
<tr>
<th>State</th>
<th>State</th>
<th>State</th>
<th>State</th>
<th>State</th>
<th>State</th>
<th>State</th>
<th>State</th>
<th>State</th>
</tr>
</thead>
<tbody>
<tr>
<td>AK=Alaska</td>
<td>GA=Georgia</td>
<td>MA=Massachusetts</td>
<td>NE=Nebraska</td>
<td>PR=Puerto Rico</td>
<td>WA=Washington</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>AL=Alabama</td>
<td>OH=Ohio</td>
<td>MD=Maryland</td>
<td>NH=New Hampshire</td>
<td>RI=Rhode Island</td>
<td>WI=Wisconsin</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>AR=Arkansas</td>
<td>HI=Hawaii</td>
<td>ME=Maine</td>
<td>NJ=New Jersey</td>
<td>SC=South Carolina</td>
<td>WY=Wyoming</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>AZ=Arizona</td>
<td>ID=Idaho</td>
<td>MI=Michigan</td>
<td>NM=New Mexico</td>
<td>SD=South Dakota</td>
<td>WA=Washington</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>CA=California</td>
<td>IL=Illinois</td>
<td>MN=Minnesota</td>
<td>NV=Nevada</td>
<td>TN=Tennessee</td>
<td>TX=Texas</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>CO=Colorado</td>
<td>IN=Indiana</td>
<td>MO=Missouri</td>
<td>NY=New York</td>
<td>UT=Utah</td>
<td>VT=Vermont</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>CT=Connecticut</td>
<td>IA=Iowa</td>
<td>MS=Mississippi</td>
<td>OH=Ohio</td>
<td>UT=Utah</td>
<td>VT=Vermont</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>DE=Delaware</td>
<td>KY=Kentucky</td>
<td>NC=North Carolina</td>
<td>OR=Oregon</td>
<td>VA=Virginia</td>
<td>VT=Vermont</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>FL=Florida</td>
<td>LA=Louisiana</td>
<td>ND=North Dakota</td>
<td>PA=Pennsylvania</td>
<td>WV=West Virginia</td>
<td>WY=Wyoming</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

10. Print your name, title, work phone number (if different from the company phone number entered in Item 5), work email address and work fax number. BE SURE TO SIGN THE FORM. The information in this form is used to acknowledge receipt of your notification and to contact you if any clarification is needed.

Contact Name: ___________________________ Title: ___________________________

Phone: ( ) ___________________ Fax: ______________________

Email: ___________________________

Providing your email address will help us communicate with you more effectively in the future.

Signature of person completing this form: ___________________________

Send the completed form to: Multistate Employer Notification

Department of Health and Human Services
Administration for Children and Families
Office of Child Support Enforcement
Multistate Employer Notification
PO Box 509
Randallstown, MD 21133

Fax the completed form to: 410-277-6820

For assistance in completing this form, call the Multistate Employer Help Desk at 410-277-9470 (8:30 a.m. – 5:00 p.m. ET). For general child support information, visit U.S. E.B.'s Employer Services website at: http://www.acf.hhs.gov/programs/csb/employers

Please note: If your company experiences a merger, acquisition, or other change that may affect this reporting requirement, please send a revised form with the new information.

THE PAPERWORK REDUCTION ACT OF 1995

Notice: This report is for the collection of information it is estimated to average 3 minutes per response, including the time for reviewing instructions, gathering and maintaining the data needed, and completing and submitting the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.
Electronic Reporting Specifications

For employers who wish to report new hires electronically, follow the submission requirements on the record layout or contact the technical support staff at the Employer New Hire Operations Center at (800) 850-6442.

Employer may transfer ASCII files through the Texas Employer Website or utilize the file transfer protocol (FTP). Employers who select FTP should contact the Employer Call Center to request a secure account.

For additional information on new hire reporting options, employers can visit the Texas Employer Website and select “New Hires” and then “Reporting Methods.”

✔ Note:
  • All fields are in upper case alphanumeric format.
  • Left justify with trailing spaces and no special characters except where specified.
  • Missing non-required fields should contain all spaces.
  • Only one address should be provided for each location. **Do not** combine street addresses and post office boxes.
    o Correct employer address: 123 Main Street
    o Incorrect employer address: 123 Main Street, P.O. Box 123
  • Include an optional employer address if the address on the employee W4 record is not the address you want the Office of the Attorney General to use for mailing income withholding orders and other child support correspondence.
  • Mail electronic media to: ENHR Operations Center, P.O. Box 149224, Austin, TX 78714-9224
### HEADER RECORD LAYOUT

**Logical Record Length = 001**

<table>
<thead>
<tr>
<th>Field Name</th>
<th>Type</th>
<th>Start Position</th>
<th>End Position</th>
<th>Optional</th>
<th>Format/Default Values</th>
</tr>
</thead>
<tbody>
<tr>
<td>Record Identifier*</td>
<td>Character</td>
<td>1</td>
<td>2</td>
<td>Required</td>
<td><strong>4</strong></td>
</tr>
<tr>
<td>Data Record Count*</td>
<td>Numeric</td>
<td>11</td>
<td>13</td>
<td>Required</td>
<td>Border Header Record</td>
</tr>
<tr>
<td>File*</td>
<td>Character</td>
<td>14</td>
<td>19</td>
<td>Required</td>
<td>File with spaces</td>
</tr>
</tbody>
</table>

### DATA RECORD LAYOUT

**Logical Record Length = 001**

<table>
<thead>
<tr>
<th>Field Name</th>
<th>Type</th>
<th>Start Position</th>
<th>End Position</th>
<th>Optional</th>
<th>Format/Default Values</th>
</tr>
</thead>
<tbody>
<tr>
<td>Record Type*</td>
<td>Character</td>
<td>3</td>
<td>4</td>
<td>Required</td>
<td>04/00</td>
</tr>
<tr>
<td>Employee Social Security Number*</td>
<td>Numeric</td>
<td>5</td>
<td>12</td>
<td>Required</td>
<td>000-00-0000</td>
</tr>
<tr>
<td>Employee First Name*</td>
<td>Character</td>
<td>15</td>
<td>21</td>
<td>Required</td>
<td></td>
</tr>
<tr>
<td>Employee Middle Name*</td>
<td>Character</td>
<td>16</td>
<td>29</td>
<td>Optional</td>
<td></td>
</tr>
<tr>
<td>Employee Last Name*</td>
<td>Character</td>
<td>30</td>
<td>44</td>
<td>Required</td>
<td></td>
</tr>
<tr>
<td>Employee Add - Line 1*</td>
<td>Character</td>
<td>45</td>
<td>74</td>
<td>Required</td>
<td>000-00-0000</td>
</tr>
<tr>
<td>Employee Add - Line 2*</td>
<td>Character</td>
<td>75</td>
<td>114</td>
<td>Optional</td>
<td></td>
</tr>
<tr>
<td>Employee Add - Line 3*</td>
<td>Character</td>
<td>115</td>
<td>158</td>
<td>Optional</td>
<td></td>
</tr>
<tr>
<td>Employee City*</td>
<td>Character</td>
<td>159</td>
<td>194</td>
<td>Required</td>
<td></td>
</tr>
<tr>
<td>Employee State*</td>
<td>Character</td>
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<td>219</td>
<td>Required</td>
<td></td>
</tr>
<tr>
<td>Employee Zip Code*</td>
<td>Character</td>
<td>220</td>
<td>234</td>
<td>Required</td>
<td>00000</td>
</tr>
<tr>
<td>Employee Birth Date*</td>
<td>Character</td>
<td>235</td>
<td>248</td>
<td>Required</td>
<td>0000-00-0000</td>
</tr>
<tr>
<td>Employee Social Security Number*</td>
<td>Character</td>
<td>249</td>
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<td>0000-00-0000</td>
</tr>
<tr>
<td>Employee Nationality*</td>
<td>Character</td>
<td>263</td>
<td>316</td>
<td>Required</td>
<td>010 - US Citizen</td>
</tr>
<tr>
<td>Employee Home Address*</td>
<td>Character</td>
<td>317</td>
<td>520</td>
<td>Optional</td>
<td></td>
</tr>
<tr>
<td>Employee Work Address*</td>
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<td>671</td>
<td>Optional</td>
<td></td>
</tr>
<tr>
<td>Employee Phone 1*</td>
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<td>701</td>
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</tr>
<tr>
<td>Employee Phone 2*</td>
<td>Character</td>
<td>702</td>
<td>721</td>
<td>Required</td>
<td>000-00-0000</td>
</tr>
<tr>
<td>Employee Phone 3*</td>
<td>Character</td>
<td>722</td>
<td>741</td>
<td>Required</td>
<td>000-00-0000</td>
</tr>
<tr>
<td>Employee Email*</td>
<td>Character</td>
<td>742</td>
<td>806</td>
<td>Required</td>
<td></td>
</tr>
<tr>
<td>Employee Website*</td>
<td>Character</td>
<td>807</td>
<td>958</td>
<td>Optional</td>
<td></td>
</tr>
<tr>
<td>Employee Notes*</td>
<td>Character</td>
<td>959</td>
<td>End</td>
<td>Optional</td>
<td></td>
</tr>
</tbody>
</table>

---

* Field Names in Bold denote required fields

**Descriptive Attributes**

**Frequency Codes are as follows:**
- **Monthly**
- **Quarterly**
- **Bi-Weekly**
- **Weekly**
- **Biennially**
- **Annually**
- **Semi-Monthly**
- **Semi-Weekly**

---

8/13/2011  Page 1 of 1  ENHR-E FILE
Chapter III: Verification of Employment

General Information

The Office of the Attorney General’s Child Support Division (OAG-CSD) may request and obtain information from an employer relating to the identity, location, employment, compensation, benefits and income of an employee for the purpose of establishment, modification or enforcement of a support order. This information is kept confidential and only used for child support purposes. [TFC § 231.302]

Texas law requires a government agency, private company, institution or other entity to provide the information requested without payment of a fee. Any individual or entity disclosing information in response to a request from a Title IV-D agency may not be held liable in any civil action or proceeding to any person for the disclosure of information. [TFC § 231.302 (b)]

Penalties

The Title IV-D agency of this state or another state may issue an administrative subpoena if an employer fails to provide requested information. [TFC § 231.303 (a)] Failure to comply with an administrative subpoena without good cause can result in a fine not to exceed $500 and the initiation of a lawsuit to compel compliance with the subpoena and payment of the fine, for which attorney’s fees and costs may be assessed. [TFC § 231.303 (b) and (c)]

Verification of Employment Letters

CSD uses a Verification of Employment Letter (VOEL) to request an employee’s employment status, work location, earnings and other relevant employment data.

If the employee named on the VOEL is currently employed, the employer should complete the entire form. If the employee is no longer employed, the employer only needs to complete the Employee Information section of the form to include the date the employee’s employment ended. If the person listed on the VOEL was never employed by the employer, the employer should indicate that information in the Comments section. Employers have the option to respond electronically or manually.
The Office of Child Support Enforcement (OCSE) has standardized the Verification of Employment (VOE) form to have all states benefit from using one standard VOE. The form can be downloaded from the Texas Employer Website.

Reporting Time Frame

Effective September 1, 2015, employers or other entities shall provide the information requested directly to the Title IV-D agency within seven (7) days from receipt of the request. [TFC § 231.302(b)(a)]

Reporting Electronically

Employers who are registered users on the Texas Employer Website can view and respond to any outstanding VOELs online. Responding electronically saves time and postage, reduces paper, and improves the quality of the data submitted. In addition, employers have the capability of viewing a history of records submitted for up to eight hours.

Reporting Manually

Employers may respond manually by submitting a paper copy of the VOE form to:

Office of the Attorney General
Central File Maintenance
P.O. Box 12048
Austin, TX 78711-2048

Sample Form

The following form can be found at the end of this chapter:

- Texas Verification of Employment Letter
- Standard Response to Verification of Employment
Frequently Asked Questions

1. As a Texas employer, do I have to respond to an employment verification letter?

   Yes. Effective September 1, 2015, employers or other entities are required to provide a response within seven days from receipt to the IV-D agency (OAG) or of another state for the purpose of establishing, modifying or enforcing a support order relating to the identity, location, employment, compensation, benefits, income, and property holdings or other assets of any person.

2. Are employers still responsible to complete their verification of employment letters if they are using a third party agent?

   Yes. Employers are still responsible for responding to verification of employment letters even if they have that responsibility outsourced to a third party agent.

3. Is it necessary to respond to a request if the employee no longer works for the company or never worked there?

   Yes. The employer, by providing an employee’s termination date or responding that the person was never an employee, enables the OAG-CSD to update its computer system, and helps prevent additional child support documents from being sent for that particular employee.

4. Can employers charge a fee for providing employment information to the OAG’s Child Support Division?

   No. The law is clear that information must be provided to the Title IV-D agency at no charge. [TFC § 231.302]

5. Is responding electronically to Verification of Employment Letters (VOELs) faster and easier than responding manually?

   Yes. When responding to VOELs electronically, the updates are made immediately, compared to responding manually, which can take from five to seven business days.

6. How can employers respond to Verification of Employment Letters (VOELs) electronically?
The first step is to register for a user account to the Texas Employer Website. Once the user account and password have been established, log in to “Verfication of Employment” and then click [Online Reporting].

7. When are Verification of Employment Letters (VOELs) that employers respond to electronically cleared from the active work list?

VOEL records are cleared from the work list at the end of the business day after the form is completed.

8. Who can employers contact if they have additional questions about Verification of Employment Letters (VOELs)?

The OAG-CSD has an Employer Call Center that operates Monday through Friday from 8 a.m. to 6 p.m. Central Time. The toll-free number is (800) 850-6442. The Employer Call Center can answer questions about VOELs. For additional questions, listen to all the options before making a selection.
VERIFICATION OF EMPLOYMENT

Dear Employer:

The Office of the Attorney General is attempting to locate the above-named person. We have received information that this person is currently working for you or has worked for you in the past. State law requires you to provide the information requested below. [Texas Family Code Chapter 231.302] We will keep this information confidential and will use it only for the purpose of collecting child support.

IF this person is NO LONGER EMPLOYED by your company,
COMPLETE ONLY THE INFORMATION IN THE BOX on the other side.

IF this person is STILL EMPLOYED by your company,
PLEASE PROVIDE THE INFORMATION IN THE BOX AND ALL APPLICABLE INFORMATION BELOW THE BOX.

Please use the enclosed postage-paid envelope to return the form to our office. If you prefer, you may complete the form online by visiting our website at www.employer.texasattorneygeneral.gov.

I certify that the information requested for this individual is required for the performance of this agency's official duties.

Thank you for your assistance.

Office of the Attorney General of Texas
Title IV-D Agency

EMPLOYER ADDRESS AND CONTACT INFORMATION

Please review your address above. Unless other information is provided by you, future correspondence from the Child Support Division (including child support orders and warrants) will be sent to this address.

Is the above address correct for future correspondence?  Q Yes  Q No
If no, please provide correct address:

____________________________________________________________________

____________________________________________________________________

(see other side)
VERIFICATION OF EMPLOYMENT

Employee Name: 
Employee SSN: 
Employee DOB (MM/DD/YY): 
Member #: 

EMPLOYEE INFORMATION

Date of Employment: Begin __________ End __________

Occupation: ______________________________________

Home (or last known) address:

Street: __________________________________________

City: ___________________ St: __________ ZIP: ______

New Employer (and address if known):

Name: ______________________________________

Street: ______________________________________

City: ___________________ St: __________ ZIP: ______

Home Telephone: __________ Date of Birth: __________

City: ___________________ St: __________ ZIP: ______

SSN (if different from above): 
Name (if different from above): ___________________

Spouse Name: ___________________

COMPLETE ONLY IF EMPLOYEE IS CURRENTLY EMPLOYED

Job Location (where employee works): 

Starting Salary: __________ per __________

Current Salary: __________ per __________

Shift (day/night): 

Payroll frequency and pay period information:

- Weekly: __________ day of week: __________
- Biweekly: __________ next pay date: __________
- Semi-Monthly: __________ days of month: __________ and __________
- Monthly: __________ day of month: __________

Is dependent medical coverage available to this employee through your company? □ Yes □ No

Employer Federal ID #: ___________________

Does employee have an active Workers’ Compensation claim? □ Yes □ No

If yes, provide name and address of the Workers’ Compensation provider: ___________________

FORM COMPLETED BY: ___________________ DATE: __________

POSITION or TITLE of PERSON COMPLETING FORM: 

TELEPHONE: ___________________ FAX Number for Payroll Department: ___________________

COMMENTS: ___________________

Thank you again for your assistance.
# Standard Response to Verification of Employment

Employers will provide requested information normally maintained on employees. If additional information not listed on this form is needed, please contact the employer.

## PAYROLL SECTION Employee Personal Information

<table>
<thead>
<tr>
<th>Full Name:</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Last</td>
<td>First</td>
<td>M.I.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Residential Address, if known:</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Street Address</td>
<td>Apartment/Unit #</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Mailing Address, if known:</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Street Address</td>
<td>Apartment/Unit #</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Home Phone:</th>
<th>Alternate Phone:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Email Address, if known:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Social Security Number:</th>
<th>Date of Birth:</th>
</tr>
</thead>
</table>

## Employer and Job Information

<table>
<thead>
<tr>
<th>Employment Status:</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Currently Employed</td>
<td>□ Terminated</td>
<td>□ Never Employed</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Title:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Employer Name:</th>
<th>Employer Address:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Employer Phone Number:</th>
<th>Employer Fax Number:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Federal EIN:</th>
</tr>
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</table>

<table>
<thead>
<tr>
<th>Full/Part Time or</th>
<th></th>
<th>Begin Date:</th>
<th>End Date:</th>
</tr>
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<tbody>
<tr>
<td>□ Full Time</td>
<td>□ Part Time</td>
<td></td>
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</table>

<table>
<thead>
<tr>
<th>Seasonal:</th>
<th>Return to Work Date:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Employee Work Site or Location:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Termination Reason:</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Voluntary</td>
<td>□ Involuntary</td>
<td></td>
</tr>
</tbody>
</table>

## Wage Information

<table>
<thead>
<tr>
<th>Pay Cycle/ Frequency:</th>
<th>Rate of Pay:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Gross Pay Per Period:</th>
<th>Net Disposable Pay Per Period:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Current Year-to-Date Earnings:</th>
</tr>
</thead>
</table>
Previous Calendar Year Earnings: $ ____________

Union Name: ________________________________  Local Number: ________________
Mandatory Union Dues: $ ____________  Mandatory Retirement: $ ____________

Tax Filing Status:  □ Single  □ Married  □ Head of Household

Number of Dependents: ____________
Workers’ Compensation:  □ Yes  □ No

Name of Workers’ Compensation Company and Contact Information: ________________________________

Certification Information

Completed by:

Employer Name (Employee’s Employer) ________________________________

Name: ________________________________
Title: ________________________________
Signature: ________________________________
Date: ________________________________
Phone number: ________________________________

If additional information is needed, please contact the person listed above.
HEALTH INSURANCE SECTION  Employee Personal Information

Full Name: ________________________________

Last 4 digits of Social Security Number: ________________________

Health Insurance Availability

Does the employer offer health insurance?  [ ] Yes  [ ] No

If not available currently to the employee, when will it be available?  ______________________

Is health insurance available for dependents or spouse?  [ ] Yes  [ ] No

Is this paid by:  [ ] Payroll Deduction  [ ] Payment

Has the employee enrolled self and/or dependents?  [ ] Self  [ ] Dependent

Medical Insurance

Insurance Provider’s Name: ____________________________

Insurance Provider’s Address: ____________________________

__________________________________________  Fax:

Policy/Contract Number: ____________________________  Cost for Employee Coverage: ____________________________

Policy Group Name/Number: ____________________________  Cost for Listed Children: ____________________________

Cost for Employee/Family: ____________________________  Cost Frequency: ____________________________

Complete the following information for each dependent:

<table>
<thead>
<tr>
<th>Name (Last, First, Middle)</th>
<th>Social Security Number</th>
<th>Date of Birth</th>
<th>Group Number</th>
<th>Policy Number</th>
<th>Start Date</th>
<th>End Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tr>
</tbody>
</table>

Dental Insurance

Insurance Provider’s Name: ____________________________

Insurance Provider’s Address: ____________________________

__________________________________________  Fax:

Policy/Contract Number: ____________________________  Cost for Employee Coverage: ____________________________

Policy Group Name/Number: ____________________________  Cost for Listed Children: ____________________________

Cost for Employee/Family: ____________________________  Cost Frequency: ____________________________
Complete the following information for each dependent:

<table>
<thead>
<tr>
<th>Name (Last, First, Middle)</th>
<th>Social Security Number</th>
<th>Date of Birth</th>
<th>Group Number</th>
<th>Policy Number</th>
<th>Start Date</th>
<th>End Date</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>

**Vision Insurance**

Insurance Provider’s Name: ____________________________

Insurance Provider’s Address: _________________________

Insurance Provider’s Phone: __________________________ Fax: __________________________

Policy/Contract Number: ____________________________

Cost for Employee Coverage: $ ______________________

Cost for Listed Children: $ _________________________

Cost for Employee/Family: $ _________________________

Cost Frequency: _________________________

Complete the following information for each dependent:

<table>
<thead>
<tr>
<th>Name (Last, First, Middle)</th>
<th>Social Security Number</th>
<th>Date of Birth</th>
<th>Group Number</th>
<th>Policy Number</th>
<th>Start Date</th>
<th>End Date</th>
</tr>
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<tbody>
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</tbody>
</table>

**Prescription Drug Insurance**

Insurance Provider’s Name: ____________________________

Insurance Provider’s Address: _________________________

Insurance Provider’s Phone: __________________________ Fax: __________________________

Policy/Contract Number: ____________________________

Cost for Employee Coverage: $ ______________________

Cost for Listed Children: $ _________________________

Cost for Employee/Family: $ _________________________

Cost Frequency: _________________________

Complete the following information for each dependent:

<table>
<thead>
<tr>
<th>Name (Last, First, Middle)</th>
<th>Social Security Number</th>
<th>Date of Birth</th>
<th>Group Number</th>
<th>Policy Number</th>
<th>Start Date</th>
<th>End Date</th>
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</tbody>
</table>
### Mental Health Insurance

Insurance Provider’s Name: 
Insurance Provider’s Address: 

Insurance Provider’s Phone:  
Fax:  
Policy/Contract Number:  
Cost for Employee Coverage:  
Policy Group Name/Number:  
Cost for Listed Children:  
Complete the following information for each dependent:  
Cost for Employee/Family:  
Cost Frequency:  

<table>
<thead>
<tr>
<th>Name (Last, First, Middle)</th>
<th>Social Security Number</th>
<th>Date of Birth</th>
<th>Group Number</th>
<th>Policy Number</th>
<th>Start Date</th>
<th>End Date</th>
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</table>

### Other Health Insurance (specify type here):  

Insurance Provider’s Name: 
Insurance Provider’s Address: 

Insurance Provider’s Phone:  
Fax:  
Policy/Contract Number:  
Cost for Employee Coverage:  
Policy Group Name/Number:  
Cost for Listed Children:  
Complete the following information for each dependent:  
Cost for Employee/Family:  
Cost Frequency:  

<table>
<thead>
<tr>
<th>Name (Last, First, Middle)</th>
<th>Social Security Number</th>
<th>Date of Birth</th>
<th>Group Number</th>
<th>Policy Number</th>
<th>Start Date</th>
<th>End Date</th>
</tr>
</thead>
<tbody>
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</tr>
</tbody>
</table>

### Certification Information

Completed by:  
Name and Title: 
Company Name: 
Signature:  
Date:  
Phone Number:  

3
Chapter IV: Income Withholding

General Information

Withholding a portion of an employee’s pay for child support is known by many names, such as garnishment, wage assignment, income withholding and withholding from earnings. The federal government developed a standardized income withholding document identified as Income Withholding Order/Notice for Support. [OMB Form 0970-0154]

Income withholding has become the most successful and efficient method for collecting court-ordered child support. Currently, Texas employers withhold more than $2 billion annually as a result of income withholding orders (IWOs). Since Sept. 1, 1997, the Office of the Attorney General’s Child Support Division (OAG-CSD) has used its authority to issue administrative IWOs directly to employers without having to request issuance by the clerk of the court. In order to meet federal requirements, OAG-CSD has automated its computer system to transmit administrative IWOs directly to employers within two days after confirmation of new employment information. Automation has led to more effective and efficient collection of support. Since September 2001, and as amended effective Sept. 1, 2013, income may also be withheld from the disposable earnings of a Texas employee for the payment of spousal support. [TFC § 8.101]

Since September 2005, TFC § 158.501(d) and TFC § 203.004(a)(12) permit a domestic relations office to issue an administrative writ of withholding in a proceeding that involves child support enforcement services. For judicial withholding orders, the clerk of the court may continue to issue the Order/Notice for child support to employers.

✔ Note: The OAG-CSD administers the Employer Maintenance Unit (EMU) to contact employers to gather pertinent company data related to child support collections to follow-up and track Administrative Income Withholding (AIW) orders. The EMU staff may contact employers by mail, telephone or fax.

Discrimination and Non-Compliance Violations

Employers may not use income withholding as grounds in whole or in part for the termination of employment or any other disciplinary action, and may not refuse to hire an employee because of income withholding. [TFC § 158.209(a) and (b)] Employers who intentionally discharge an employee based in whole or part on income withholding are subject to legal action against them by the employee, the IV-D agency, a friend of the court, or a domestic relations office that could
result in the awarding of damages, court costs and attorney’s fees to be paid by the employer. [TFC § 158.209]

An employer who does not comply with the Order/Notice is liable:

- To the obligee for the amount not paid
- To the obligor/employee for the amount withheld and not paid
- For reasonable attorney’s fees and court costs

[TFC § 158.206]

An employer who knowingly fails to withhold or remit the court-ordered child support may be subject to a $200 fine for each pay period the employer failed to withhold income for child support or remit the income withheld to the person or office identified in the Order/Notice within the time required. [TFC § 158.210]

Withholding Time Frames

Employers shall begin to withhold income in accordance with an order or notice of withholding not later than the first pay period after the date the order or notice was delivered to the employer. The employer shall continue to withhold income as required by the order or notice as long as the obligor is employed by the employer. [TFC §158.202]

Employers deduct and remit support on regular pay dates, similar to deductions for FICA and federal income tax withholding and do not have to change payroll frequency or pay dates. [TFC § 158.203] When the amount to be withheld changes or the withholding is to stop, the employer will be notified by the OAG-CSD or the court. It is not an employer’s responsibility to determine if a condition exists that would terminate the withholding process.

Requesting a Hearing

Employers who believe that an Order/Notice should not apply to them may request a hearing with the court. A motion for a hearing on the applicability of an Order/Notice must be requested no later than 20 days after the date an Order/Notice is received and the hearing must be held on or before the 15th day after the date the motion is made. An order or writ of withholding is binding and the employer shall continue to withhold income and remit the amount withheld pending further order of the court. [TFC § 158.205]
Administrative Fee

An employer may deduct an administrative fee of not more than $10 each month from the obligor’s disposable earnings in addition to the amount to be withheld as child support. [TFC § 158.204]

The administrative fee is optional and must not be assessed for each Order/Notice received for an employee (obligor).

Determining Maximum Amount to Be Withheld for Support

The Texas Family Code provides definitions that determine the maximum amount of support that can be withheld from an employee’s earnings.

Texas law does not limit the amount withheld for dependent health insurance. Texas law does not expressly place any limits on the amount an employer can withhold from an employee’s earnings to satisfy a court order for dependent health insurance.

TFC § 101.011. EARNINGS

“Earnings” mean a payment to or due an individual, regardless of source and how denominated. The term includes a periodic or lump sum payment for:

(1) wages, salary, compensation received as an independent contractor, overtime pay, severance pay, commission, bonus, and interest income;

(2) payments made under a pension, an annuity, workers’ compensation, and a disability or retirement program; and

(3) unemployment benefits.

TFC § 101.010. Disposable Earnings

“Disposable earnings” mean the part of the earnings of an individual remaining after the deduction from those earnings of any amount required by law to be withheld, union dues, nondiscretionary retirement contributions, and medical, hospitalization, and disability insurance coverage for the obligor and the obligor’s children.
TFC § 158.009 MAXIMUM AMOUNT WITHHELD FROM EARNINGS

An order or writ of withholding shall direct that any employer of the obligor withhold from the obligor's disposable earnings the amount specified up to a maximum amount of 50 percent of the obligor's disposable earnings.

The following is an example of the maximum amount that can be withheld for support from an employee’s earnings.

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employee's earnings</td>
<td>$2,000</td>
</tr>
<tr>
<td>Minus “amounts required by law to be withheld” (e.g., OASDI, Medicare, and FIT withholding)</td>
<td>– $290</td>
</tr>
<tr>
<td>Minus union dues, nondiscretionary retirement contributions, and medical, hospitalization, and disability insurance coverage for the obligor and the obligor’s children</td>
<td>– $600</td>
</tr>
<tr>
<td>Total of TFC disposable earnings</td>
<td>$1,110</td>
</tr>
<tr>
<td>TFC maximum amount that may be withheld for monetary support obligations (child, medical and spousal, as applicable)</td>
<td></td>
</tr>
<tr>
<td>$1,110 TFC disposable earnings x 50% garnishment limit</td>
<td><strong>$555</strong></td>
</tr>
</tbody>
</table>

Medical Support Deductions

State and federal law require medical support to be included when establishing child support or in any other suit affecting the parent-child relationship. [TFC § 154.008 and § 154.181]

Employers may receive an income withholding order requiring the deduction of a specific amount for medical support. When an employer receives an income withholding order requiring the garnishment of wages for “current cash medical” or “MSPP1,” the deduction should be made, along with all applicable child support deductions, from the employee’s disposable earnings.

The court order may, in lieu of ordering cash medical support (MSPP1), require the employee to provide dependent medical insurance through the employer. When this option is ordered, a National Medical Support Notice (NMSN) will be sent to the employer requiring the enrollment of dependent(s) into a medical health plan. (Reference Chapter V: Medical Support)
Multiple Orders

Receiving multiple orders for garnishment of an employee’s earnings can and does occur. Although there is no limit to the number of income withholding orders one obligor can have, there is a maximum amount an employer can garnish from an employee’s disposable earnings.

An employer receiving two or more orders or notices for one obligor shall comply with each order or notice to the fullest extent possible, and must:

. . . pay an equal amount towards the current support in each order or writ until the employer has complied fully with each current support obligation and, thereafter, equal amounts on the arrearages until the employer has complied with each order or writ, or until the maximum total amount of allowed withholding is reached, whichever occurs first. [TFC § 158.207 (b)]

Example 1
An employer receives the following child support orders for an employee:

1st order = $100 per month for current support and $50 per month for arrears

2nd order = $200 per month for current support and $50 per month for arrears

3rd order = $50 per month for current support and $25 per month for arrears

The employee’s disposable income is $850. The total court-ordered amount to be withheld is $475, but the maximum amount that can be withheld according to the stipulated percentages of disposable income is $425.

The full amount of the current support to be deducted for all three orders totals $350. Equal amounts on the arrearages ($25 for each case) would then be deducted until the $425 maximum is reached.

The remaining $50 that is due is the employee’s responsibility.

Example 2
An employer receives the following child support order for an employee:
1st order = $100 per month for current support and $100 per month for arrears

2nd order = $200 per month for current support and $25 per month for arrears

3rd order = $50 per month for current support and $35 per month for arrears

The employee’s disposable income is $900. The total court-ordered amount to be withheld is $510, but the maximum amount that can be withheld according to the stipulated percentage of disposable income is $450.

The full amount to be deducted for current support for all three orders totals $350. This leaves $100 to be applied to the arrears in each order. The amount of the smallest order that can be equally satisfied allows $25 to be deducted for the arrears on each order for a total of $75. The second order has now received the full court-ordered amount due. This leaves an additional $25 to be equally divided between the first ($75 balance) and third ($10 balance) orders. Since the total amount due in the third order can be satisfied with an equal portion of the remaining balance, deduct $10 for each order. Deduct the remaining $5 for the first order since it is the only order with an outstanding balance.

The remaining $60 due in the first order is the employee’s responsibility. An employer is only responsible for deducting the total amount of child support due or the maximum stipulated percentage of an employee’s disposable income, whichever is less. The employer is not responsible for any additional amount of child support due.

Spousal Support

The Texas Constitution was amended in 1999 to permit wage withholding for spousal maintenance. In 2001, the Texas Legislature added income withholding provisions for spousal support to the Family Code. These provisions dictate that current child support (including current “cash medical” child support) is withheld first, followed by current spousal support, followed by withholding for past-due child and medical support arrears, with spousal support arrears withheld last.

If there is only one Order/Notice of withholding for the employee (obligor), the employer can simply follow the basic rule of withholding the entire amount required by the order/notice or the maximum amount that may be withheld, whichever is less. If there is more than one order/notice but the maximum amount that may be withheld is greater than the sum of all withholding required, the employer fulfills each order/notice’s withholding requirements.
If the employer is faced with two or more Orders/Notices and the sum of the withholding requirements exceeds the amount that the employer may withhold from the obligor’s earnings, the employer should follow the procedures indicated in the following example.

<table>
<thead>
<tr>
<th>Income Withholding Order/Notice #1</th>
<th>Income Withholding Order/Notice #2</th>
</tr>
</thead>
<tbody>
<tr>
<td>$200 Current child support</td>
<td>$225 Current child support</td>
</tr>
<tr>
<td>$100 Past-due child support</td>
<td>$50 Past-due child support</td>
</tr>
<tr>
<td>$75 Current medical support</td>
<td>$0 Current medical support</td>
</tr>
<tr>
<td>$50 Past-due medical support</td>
<td>$50 Past-due medical support</td>
</tr>
<tr>
<td>$125 Current spousal support</td>
<td>$0 Current spousal support</td>
</tr>
<tr>
<td>$25 Past-due spousal support</td>
<td>$0 Past-due spousal support</td>
</tr>
</tbody>
</table>

1. Determine the maximum amount that may be withheld for the pay period: 50% x disposable earnings.

2. Add **current support** amounts – current child support, current medical support and current spousal support – of each Order/Notice to be withheld for the pay period.

<table>
<thead>
<tr>
<th>Order/Notice #1</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Current child support</td>
<td>$200</td>
</tr>
<tr>
<td>Current medical support</td>
<td>$75</td>
</tr>
<tr>
<td>Current spousal support</td>
<td>$125</td>
</tr>
<tr>
<td><strong>Current support total for Order/Notice #1</strong></td>
<td><strong>$400</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Order/Notice #2</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Current child support</td>
<td>$200</td>
</tr>
<tr>
<td>Current medical support</td>
<td>$0</td>
</tr>
<tr>
<td>Current spousal support</td>
<td>$0</td>
</tr>
<tr>
<td><strong>Current support total for Order/Notice #2</strong></td>
<td><strong>$225</strong></td>
</tr>
</tbody>
</table>

3. Add **past-due support** amounts – past-due child support, past-due medical support and past-due spousal support – of each Order/Notice to be withheld for the pay period.
4. Of the maximum amount that may be withheld from the obligor’s disposable earnings, allocate dollar-for-dollar to each Order/Notice for current support or until the maximum withheld amount is allocated. Then allocate dollar-for-dollar to each Order/Notice for past-due support or until the maximum withheld amount is allocated.

If the maximum amount that may be withheld is $850 for the pay period, then the employer would allocate $225 to each of the Orders/Notices for current support, and then allocate $175 to current support for Order/Notice #1, thus completing the withholding for current support. The employer would begin allocating against past-due support payment requirements. The employer would allocate $100 to each of the Orders/Notices, completing the past-due payment requirement for Order/Notice #2. Since the employer only has $25 remaining of the $850 maximum amount that may be withheld, this $25 is allocated to Order/Notice #1.

<table>
<thead>
<tr>
<th>Order/Notice #1</th>
<th>Order/Notice #2</th>
<th>Running Total Withheld Amt.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Current Support Owed</td>
<td>$400</td>
<td>$225</td>
</tr>
<tr>
<td>$225</td>
<td>$225</td>
<td>$450</td>
</tr>
<tr>
<td>$175</td>
<td>--</td>
<td>$625</td>
</tr>
<tr>
<td>Current Support Withheld</td>
<td>$400</td>
<td>$225</td>
</tr>
<tr>
<td>Past-due Support Owed</td>
<td>$175</td>
<td>$100</td>
</tr>
<tr>
<td>$100</td>
<td>$100</td>
<td>$825</td>
</tr>
<tr>
<td>$25</td>
<td>--</td>
<td>$850</td>
</tr>
<tr>
<td>Past-due Support Withheld</td>
<td>$125</td>
<td>$100</td>
</tr>
<tr>
<td>Amount to be Remitted for Each Order/Notice</td>
<td>$525</td>
<td>$325</td>
</tr>
</tbody>
</table>
Severance Pay and Lump Sum Payments

In 2007, the Texas Legislature made two significant changes for employers to take into account when giving an employee a severance package or lump sum payment(s).

Lump Sum

Texas employers who have received an administrative notice of withholding for child support from OAG-CSD may not make a lump sum payment to an employee in an amount of $500 or more without first notifying OAG-CSD to determine whether all or a portion of the payment should be applied to child support arrearages owed by the obligor. [TFC § 158.215 (b) and (c)]

A lump sum payment is defined as income in the form of a bonus or an amount paid in lieu of vacation or other leave time. The term does not include an employee’s usual earnings or an amount paid as severance pay upon termination of employment. [TFC § 158.215]

The maximum amount that may be withheld is 50 percent of the lump sum after taxes or the total amount of arrears, whichever is less.

<table>
<thead>
<tr>
<th>Bonus Disposable Earnings</th>
<th>Example 1</th>
<th>Example 2</th>
<th>Example 3</th>
<th>Example 4</th>
</tr>
</thead>
<tbody>
<tr>
<td>Arrears</td>
<td>$5,000</td>
<td>$10,000</td>
<td>$600</td>
<td>$2,000</td>
</tr>
<tr>
<td>Withhold</td>
<td>$5,000</td>
<td>$250</td>
<td>$600</td>
<td>$1,500</td>
</tr>
</tbody>
</table>

Severance Pay

Texas employers who receive an Order/Notice of withholding shall withhold from an employee’s severance pay an amount equal to the amount the employer would have withheld if the severance pay had been paid as the employee’s usual earnings. [TFC § 158.214 (b)]

Severance pay is income paid upon termination of employment in addition to the employee’s usual earnings from the employer at the time of termination. [TFC § 158.214] Employers can use the following formula to determine how many times to apply the Order/Notice of withholding to the severance pay:
Severance Pay Gross **DIVIDED BY** Gross Pay Cycle

**EQUALS** Number of Withholdings

Money withheld from a severance package is to be sent to the Texas State Disbursement Unit (SDU).

**Receiving Income Withholding Orders/Notices Electronically**

Employers have two different options for retrieving income withholding orders electronically: through the federal portal or the Texas Employer Website (Texas Employer Portal). To determine which option is best, consider the following:

- Does the employer have employees in more than one state?
- Does the employer have companies in more than one state?
- What are the company’s technical capabilities?

**Federal Portal**

For employers who have employees or companies in more than one state, the Federal Portal is likely the optimal solution if the company has the technical capabilities to convert. In August 2004, the federal Office of Child Support Enforcement (OCSE) initiated the electronic Income Withholding Order (e-IWO) project to enable states and employers to exchange IWO documents electronically and improve the IWO process. Visit the [OCSE website](http://www.ocrs.gov) to learn more about e-IWO and the federal portal.

**Texas Employer Website (Texas Employer Portal)**

For employers who have all their employees and companies in Texas, the Texas Employer Portal is likely the optimal solution. The Texas Employer Portal ([Texas Employer Website](http://www.ocrs.gov)) also allows employers to retrieve their income withholding orders electronically. When an employer opts into this service, the employer will receive an email notification when an income withholding order is available for retrieval. The employer simply logs into the Texas Employer Website and retrieves the income withholding orders. This process saves time and allows employers to save or print copies of their income withholding orders.

**Note:** Employers who complete Employer New Hire Reporting (ENHR) online have the option to receive income withholding orders electronically.
Choosing a Data Format

Depending on whether an employer uses the Federal Portal or Texas Employer Website, employers can choose from three different data formats (alone or in combination) that best fit their business needs: PDF (image), XML and TXT (text) files.

- **PDF** – This is an image of the paper document that can be easily printed if an exact copy of the withholding order is needed.
- **XML and TXT** – These formats are data records of the withholding orders and are intended for employers who want to program their own system so that the withholding data automatically interfaces with their own internal files.

Regardless of the data format(s) chosen, all files for the day are rolled up into one convenient zipped file available for downloading.

How to Request Electronic Files

To receive electronic files, employers must be registered users on the Texas Employer Website to log on and retrieve files. To register for a user account, visit the Texas Employer Website, click [Request New Account] and follow the instructions.

If you’re already a registered user on the Texas Employer Website, log on to the site and select “Wage Withholding” from the top navigation bar, and then click [Delivery Options]. From the online screen, employers are allowed to request electronic retrieval of Withholding Orders/Notices in a PDF format and specify the email address where notifications will be sent when there are files to retrieve. Employers interested in receiving either TXT or XML data formats must make the request by email. Child support staff will send a user guide to review and work individually with each interested employer.

To learn more about receiving withholding orders electronically, go to the Texas Employer Website and review the information found under the “Wage Withholding” top navigation bar and then click [Electronic Process].

Sample Form

The Order/Notice to Withhold Income for Child Support can be found at the end of this chapter.
Frequently Asked Questions

1. What if an employer sends the amount withheld to the wrong office?

An employer who sends the amount withheld to the wrong office or person must resend the amount to the agency or person identified in the Order/Notice no later than two business days after the date of receiving the returned amount. [TFC § 158.212]

2. How will an employer know to deduct support from an employee’s pay?

An employer will receive an Income Withholding Order/Notice for each employee whose child support payment must be deducted from the employee’s pay. Employers should not deduct child support from an employee’s pay until the Order/Notice relating to the employee is delivered or the employee voluntarily requests income withholding. Employers must continue to comply with an Order/Notice until a termination Order/Notice or other similar notice from an authorized person is received.

3. Do employers notify the employee when an Order/Notice is received?

The employee will receive notice that withholding will occur. Before an employer receives a judicial notice of withholding, the employee will have had an opportunity to contest the withholding. An Income Withholding Order/Notice is issued to the employer and employee at the same time. Inform employees who claims not to have received notice to contact the appropriate child support office or the entity that issued the Order/Notice.

Orders/Notices from out-of-state persons or entities should substantially conform to the form set out in the Texas Family Code and specify that a copy must be provided to the employee.

4. Can a copy of the Order/Notice or a notarized original be honored?

The Title IV-D agency and/or a domestic relations office (DRO) have the authority to administratively order and issue Income Withholding Orders/Notices directly to employers, and thus such an instrument will not be a document certified by the clerk of the court. [TFC § 158.501]

When an Order/Notice is issued by the court, the clerk of the court keeps the original and issues a certified copy to the employer. The clerk may issue certified copies of Orders/Notices to employers by first class mail. Upon request, the following delivery methods are also acceptable: certified mail, registered mail or facsimile. The certified copy must be honored.
The clerk may deliver an order or judicial writ of withholding under Subsection (c) by electronic mail if the employer has an electronic mail address, or by facsimile transmission if the employer is capable of receiving documents transmitted in that manner. If delivery is accomplished by electronic mail, the clerk must request acknowledgment of receipt from the employer or use an electronic mail system with a read receipt capability. If delivery is accomplished by facsimile transmission, the clerk’s facsimile machine must create a delivery confirmation report. [TFC § 158.105]

An employer may also receive an income withholding order from another state. If the instrument appears regular on its face, the employer must honor it as if it were issued by a Texas court. [TFC § 159.502]

Non IV-D attorneys, individuals and non-governmental entities must submit a Notice of an Order to Withhold and include a copy of the Income Withholding Order unless, under a state’s law, an attorney in that state may issue an Income Withholding Order. In that case, the attorney may submit an Order/Notice to Withhold and include a copy of the state law authorizing the attorney to issue an Income Withholding Order/Notice. Texas law does not authorize a private attorney to issue an income withholding order. [TFC § 158.001]

5. What should employers do who receive orders that have obvious errors?

An employer should contact the attorney or office that requested issuance of the Order/Notice so that the necessary action can be taken to correct the error. An employer may also file a request for a hearing with the OAG-CSD or a motion for a hearing with the court on the applicability of the order or notice within 20 days of receiving the Order/Notice. The request for hearing submitted to the OAG-CSD can be in any form and will result in an informal hearing within 15 days. The employer can request that the judge or OAG-CSD clarify the intentions of the order. The employer should attempt to comply with the Order/Notice pending the results of the hearing. [TFC § 158.205]

6. What should an employer do who receives an Income Withholding Order/Notice for an employee who has an existing IRS levy?

By law, a child support income withholding instrument that is based on a support order signed by the court before the date that the employer received a wage levy from the Internal Revenue Service takes priority over an IRS levy. [26 USC 6334 (a) (8)]

7. What should an employer do who receives an Order/Notice for an employee who has an existing federal wage garnishment to pay a non-tax debt?
Income Withholding Orders/Notices for child or spousal support take precedence over all federal wage garnishments for non-tax debts. [31 USC 3720 D (h)] [31 CFR 285.11(i) (3) (i)]

8. What should an employer do who receives an order to withhold child support for an employee who has a non-federal garnishment for a debt that is unrelated to child or spousal support?

First and foremost, the Texas Constitution, unless superseded by a federal law that permits a federal agency to garnish a Texan's wages, prohibits the garnishment of wages for debts other than child or spousal support. If an employer receives a garnishment order against a Texas employee's wages (perhaps from a creditor in a sister state) that is not a child or spousal support income withholding instrument, the employer is prohibited by Texas law from complying with the garnishment order. If for some reason Texas amends its Constitution to permit garnishment for other debts, withholding for child support has priority over any garnishment, attachment, execution, or other assignment or order affecting disposable earnings. [TFC § 158.008]

9. Should an employer begin withholding even though an employee claims to have never received an Order/Notice?

Yes, withhold child support from the employee’s pay check according to the instructions in the Order/Notice. Tell the employee to immediately contact the local child support office or private attorney. The employer should continue to withhold payments until a termination order or some other official notice is received from an authorized person.

10. What steps should an employer take if an employee is receiving workers’ compensation and not receiving wages?

If an employer is not paying the employee’s wages, withholding cannot take place. However, workers’ compensation is a substitute for wages and is subject to withholding. Unless the employer is self-insured, the employer must send a copy of the Order/Notice to the insurance carrier with whom the claim has been filed. If the employee will not be returning to work, the employer must notify the court and obligee of the termination of employment within seven days and provide the employee’s last known address and the name and address of the new employer, if known. [TFC §§ 158.206, 158.213]

If the employee returns to work after being on workers’ compensation, the employer should resume income withholding according to the Order/Notice.

11. What if an employer receives an order for an obligor who is not an employee?
The employer should promptly notify OAG-CSD by calling the Employer Call Center at (800) 650-6442. The employer will be referred to the proper child support office.

12. What if an employer receives an order to withhold from another state?

Texas employers are required to honor income withholding orders issued in other states as long as the order appears valid. Orders/Notices should substantially conform to the form in the Texas Family Code.

On receipt of another state’s order, the employer must immediately provide a copy of the order to the employee and remit the amounts as directed in the withholding order. [TFC § 159.502] Employers who are currently withholding income for a family, based on a child support order – and receive another order for the same family directing payments to a different payment registry – should contact the following to determine the proper registry to which payments should be sent:

- Company’s legal counsel
- Child Support Division of the Office of the Attorney General
- Private attorney or agency that sent the subsequent order

13. Can an employer combine payments if the employer is withholding child support from the earnings of more than one employee?

Yes, but combine only those payments that go to the same registry. In Texas, some payments are mailed to the Texas State Disbursement Unit (SDU) and some to county registries. Verify whether the county registry will accept one check for multiple obligors. See the form and instructions for combining payments.

Combined payments sent to the Texas SDU must include a processing form that contains the following identifying information for each employee:

- OAG case number/court cause
- Name and Social Security number (SSN) of each employee (obligor) for whom child support was withheld
- Amount withheld per Order/Notice
- Obligee’s name and SSN, if available
- Name of the county or county’s federal information processing code
- Date on which the withholding occurred

14. What should an employer do if an OAG-CSD employee wants corrections made to an Order/Notice?
An employer is required to follow the terms of an Order/Notice and is not obligated to honor telephone requests for corrections or changes to Orders/Notices. Many Orders/Notices do not terminate just because a child turns 18 years old. If a correction or change is needed on an Order/Notice, request an amended writ, modified order or official letter. Until then, an employer should continue to comply with the Order/Notice.

15. When an employee with a support order terminates and is rehired by the same company, is the order in effect immediately upon the employee’s return or should the employer wait to receive a new order?

The employer should make sure the company reported the termination of the employee to the OAG-CSD and subsequently reported the rehire of the employee. Reporting the employee as a new hire will ensure the employer receives the most recent income withholding order. Employers should wait to receive a new withholding order or notice, as there may be a subsequent order since the last pay period of employment that modified the support obligation amounts.

16. What is the retention period for support orders or records concerning withholding?

No length of retention is specified in the Texas Family Code. How long to retain records is the employer’s decision.

17. Does the current support obligation end date stated in the court’s child support order affect the employer’s duty to continue withholding as demanded in the order? (A typical Texas order requires that the current support obligation continue until the child graduates from high school or reaches age 18, whichever is later.)

No, an employer is still bound to comply with the terms of the income withholding order until the income withholding order is superseded by an updated income withholding order or until the Order/Notice is terminated by the court or issuing agency.

In many cases, the ending of the support obligation results in the existing income withholding order being replaced by an updated Order/Notice that simply increases the amount ordered to be withheld in order to pay past-due support by the amount of the now expired support obligation. (See the following example.)
Existing Income Withholding Order

Employer is required by law to deduct these amounts from the employee’s (obligor’s) income until further notice.

- $300.00 monthly in current support
- $150.00 monthly in past-due support

Arrears 12 weeks or greater? yes [✓] no [ ]

Updated Order

Employer is required by law to deduct these amounts from the employee’s (obligor’s) income until further notice.

- $0.00 monthly in current support
- $450.00 monthly in past-due support

Arrears 12 weeks or greater? yes [✓] no [ ]

If the employee contends that support has ended or is being over-withheld, an employer should advise the employee to direct any concerns to the court or agency that issued the income withholding order.

18. Is a diploma or graduation certificate required to stop the order or should an employer require an official release of withholding?

If there is no termination date in the income withholding order, the employer should require an Order/Notice terminating withholding or an official letter from an authorized person (see preceding answer) before stopping wage withholding.

19. Should an employer honor an Order/Notice that is addressed to a different employer?

A properly issued Order/Notice is binding regardless of whether the employer is specifically named in the Order/Notice. [TFC § 158.201 (b)]

20. Should an employer honor an employee’s request to withhold wages for child support if the employer has not received an Order/Notice?

While an employer is not required by statute to comply with an employee’s request to voluntarily withhold and remit withheld payments without being provided an Order/Notice, it is recommended that an employer make every effort to assist the employee in fulfilling his or her duty of support. It is suggested an employer require the employee to make a written request for voluntary withholding.
Employers should verify the proper location for mailing payments. For Texas support orders, it usually is the following address: Texas State Disbursement Unit, P.O. Box 659791, San Antonio, TX 78265-9791.

21. Should an employer honor the demand to pay spousal support on an Income Withholding Order/Notice?

Yes. Since Sept. 1, 2001, the Texas Family Code has permitted income withholding for spousal maintenance.

22. Are payments made by an employer to an employee to reimburse the employee for employment-related expenses included in the definition of earnings for the purpose of calculating the maximum amount that may be garnished from an employee’s paycheck under federal and state garnishment limitation laws, thus increasing the maximum amount that may be garnished from the employee’s wages?

This is an unsettled question of law. Absent concerns that an employer is intentionally mislabeling payments to an employee as expense reimbursements rather than as wages in order to thwart an income withholding instrument, the Texas IV-D agency will not challenge an employer who chooses to exclude expense reimbursements in a determination of the maximum amount that may be withheld in response to a child support income withholding instrument.

23. Should an employer include the tips that an employee reports as part of that employee’s earnings in calculations to determine the maximum amount that can be withheld?

It is the opinion of the OAG-CSD that tips reported to the employer as required by federal Internal Revenue Code § 6053, whether pooled or not, are part of an employee’s earnings under the Texas Family Code in that they represent a “payment to . . . an individual, regardless of source and how denominated” that arises as a direct result of employment. As such, reported tips should be included in determining disposable earnings under federal and Texas law. Including tips in employee earnings increases the maximum amount that may be withheld for the support of the employee’s children.

However, an employer may only withhold amounts over which it has control. If the maximum amount that can be withheld for a particular employee for a given pay period is $200 (based on employee tips and employer wages), but the employer only has $150 of the employee’s salary remaining after paying the amounts required by law to be withheld, then, of course, the employer can only withhold the $150. In this instance, the only earnings that will make their way to the employee are tips.

24. Are employers required to withhold child support payments from independent contractors?
Yes, child support garnishment must be honored with respect to independent contractors. Title 5 of the Texas Family Code broadly defines an employer as anyone, an individual or an entity, “that pays or owes earnings to an individual.” [TFC § 101.012]

The term “earnings” is also broadly defined as “a payment to ... an individual, regardless of source and how denominated.” The definition goes the further step of specifically saying that earnings include payments to an independent contractor. [TFC § 101.011]

TFC Chapter 158, “Withholding from Earnings for Child Support,” contains the Texas statutes that every employer needs to follow. More specifically, TFC § 158.201 directly tasks the employer to comply with judicial or administrative writs of withholding.

25. How much should be withheld if the payment period is irregular?

In the absence of a set wage period, the employer must (1) determine the period of the services for which the independent contractor is being compensated and (2) appropriately determine the amount to withhold based on the base period specified in the wage withholding order. (See the following example.)

<table>
<thead>
<tr>
<th>Scenario:</th>
<th>The gross amount to be paid to the independent contractor for three months’ work and the amount due to the independent contractor under the terms of the contract is $3,000.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Order information:</td>
<td>This document is based on the support or withholding order from Texas. The employer is required by law to deduct this amount from the employee/obligor’s income until further notice.</td>
</tr>
<tr>
<td>• $75.00 per week current child support</td>
<td></td>
</tr>
<tr>
<td>• $25.00 per week past due child support (arrears are greater than 12 weeks)</td>
<td></td>
</tr>
<tr>
<td>• Total of $100 per week to be forwarded to the payee below</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Issue:</th>
<th>The employer does not have to vary the pay cycle to be in compliance with the support order. If the pay cycle does not match the ordered payment cycle, withhold one of the following amounts:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• $100 per weekly pay period</td>
<td></td>
</tr>
<tr>
<td>• $200 per biweekly pay period (every two weeks)</td>
<td></td>
</tr>
<tr>
<td>• $216.67 per semimonthly pay period (twice a month)</td>
<td></td>
</tr>
<tr>
<td>• $433.33 per monthly pay period</td>
<td></td>
</tr>
</tbody>
</table>
Solution: Since the pay period for this particular pay period is three months, the employer must withhold three months’ worth of child support (3 x $433.33 = $1,300) or the maximum amount permitted by law to be withheld for child support, whichever is less. Since the employer does not withhold FIT or FICA from the amount due to the independent contractor, the independent contractor’s disposable earnings will be equal to gross earnings. [TFC § 101.010]

The TFC withholding limit in this situation would be $3,000 x 50% = $1,500. Since the $1,300 withholding as commanded by the wage withholding order is less than the limit, the employer must withhold $1,300 and promptly remit this amount in accordance with the wage withholding order’s instructions.

26. What if an employee informs an employer a bonus has already been taken into consideration in determining the monthly amount of child support and is already being withheld?

The employer must still contact the OAG-CSD if the bonus is equal to or greater than a gross amount of $500.

27. What if an employer has contests and an employee wins a truck, vacation or non-monetary item? Is the value of the item considered a lump sum payment?

No, the lump sum withholding is strictly applied to income.

28. How will the OAG-CSD enforce this new process?

Enforcement action, up to and including judicial enforcement for failure to withhold income, will be taken against any employer who fails to comply with lump sum reporting requirements.

29. Are noncustodial parents aware of the lump sum law or are employers required to advise them when the bonus is given?

Employers will receive a document explaining the law, which can be provided to employees at the time the bonus is given.

30. When the payment is submitted, does an employer need to identify the payment as a lump sum?

No.
31. Should payments for an amount withheld from a lump sum be remitted to the State Disbursement Unit?

Yes.

32. What is the maximum amount that may be withheld from a lump sum payment?

The maximum amount that may be withheld is 50 percent of the lump sum after taxes or the total amount of arrears, whichever is less.

<table>
<thead>
<tr>
<th></th>
<th>Example 1</th>
<th>Example 2</th>
<th>Example 3</th>
<th>Example 4</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bonus Disposable</td>
<td>$10,000</td>
<td>$500</td>
<td>$3,000</td>
<td>$3,000</td>
</tr>
<tr>
<td>Earnings</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Arrears</td>
<td>$5,000</td>
<td>$10,000</td>
<td>$600</td>
<td>$2,000</td>
</tr>
<tr>
<td>Withhold</td>
<td>$5,000</td>
<td>$250</td>
<td>$600</td>
<td>$1,500</td>
</tr>
</tbody>
</table>

33. How will an employer be notified to withhold part or all of a lump sum payment?

An employer will receive a faxed authorization from the OAG-CSD in response to submitted employee information.

34. Should an employer withhold lump sum payments when a bonus is paid in company stock or directed to another investment fund?

Yes, if the employee receives a lump sum payment of company stock or requests that a lump sum payment be directed into a 401K, company stock or another investment fund, then the employer should withhold from the lump sum payment before paying or directing it to another investment fund.

35. Are all past-due amounts (child support, medical support and spousal support) required to be reported for lump sum distribution?

Child support and medical support arrearages are reported, but spousal support is not.

36. Should the gross or net amount of the lump sum be reported?

The gross amount should be reported.
37. Is an employer required to report the lump sum payment if it is from a medical settlement due to injury on the job?

No.

38. Given the 50 percent limit, how do employers apply the lump sum when the employee has multiple cases with arrears?

Until the arrearage amount is satisfied on a case, 50 percent of the lump sum payment is applied equally to all cases.

39. What should employers do who receive Orders/Notices they believe should not apply to them?

Employers may request a hearing with the court or OAG-CSD, as appropriate, if they believe an Order/Notice should not apply to them. A motion for a hearing on the applicability of an Order/Notice must be requested no later than 20 days after the date an Order/Notice is received. The employer must continue to withhold pending further order of the court or action of OAG-CSD.

40. Is compensation available to employers for complying with income withholding orders?

An employer may deduct an administrative fee from an employee’s disposable earnings in addition to the amount withheld for child support. The fee may not be more than $10 each month. [TFC § 158.204]

41. What if an employer does not want to hire someone because the individual has an income withholding order?

Employers are prohibited by law from discriminating against an employee because of income withholding for child support. An employee cannot be terminated or disciplined because of income withholding for child support. An employer may not refuse to hire an employee because of income withholding.

Employers who violate this law prohibiting discrimination on the basis of income withholding are subject to legal action against them by the employee or the IV-D agency that could result in the awarding of damages, court costs and attorney fees to be paid by the employer to the employee. [TFC § 158.209]

42. What if an employer does not comply with the Order/Notice?

An employer who does not comply with the Order/Notice is liable:
• To the obligee for the amount not paid
• To the obligor/employee for the amount withheld and not paid
• For reasonable attorney’s fees and court costs

[TFC § 158.206]

An employer who knowingly fails to withhold court-ordered child support may be subject to a $200 fine for each pay period the employer failed to withhold income for child support or remit the income withheld to the person or office identified in the Order/Notice within the time required.

43. Who can employers contact if they have additional questions?

The OAG-CSD has an Employer Call Center that operates Monday through Friday from 8 a.m. to 6 p.m. Central Time. The toll-free number is (800) 850-6442. Listen to all options before making a selection.
# INCOME WITHHOLDING FOR SUPPORT

**INSTRUCTIONS:**
- Enter all pertinent information as indicated on the form.
- Complete all fields in the INCOME WITHHOLDING FOR SUPPORT section.
- Review and sign the order before submission.

### Original Income Withholding Order/Notice for Support (IWO)

- **Date:**

### Amended IWO

- **State/Tribal/County/Terminal:**
- **City/Country/Dist/Trib:**
- **Private Individual/Entity:**

### One-Time Order/Notice for Lump Sum Payment

- **State/Tribal/County/Terminal:**
- **city/Country/Dist/Trib:**
- **Private Individual/Entity:**

### Termination of IWO

- **State/Tribal/County/Terminal:**
- **City/Country/Dist/Trib:**
- **Private Individual/Entity:**

### Child Support Enforcement (CSE) Agency

- **Remittance ID (include w/payment):**
- **Order ID:**
- **CSE Agency Case ID:**

### Employer

- **Name:**
- **Address:**
- **FEIN:**

### Employee/Obligor

- **Name:**
- **Social Security Number:**
- **Address:**
- **Social Security Number:**
- **Date of Birth:**

### ORDER INFORMATION:

- This document is based on the support or withholding order from [State/Tribal].
- You are required by law to deduct these amounts from the employee/obligor’s income until further notice.

- **$_____**
- **$_____**
- **$_____**
- **$_____**
- **$_____**
- **$_____**

### amounts to Withhold

- **Per [weekly, biweekly, monthly, every two weeks]:**
- **Past-due child support:**
- **Past-due cash medical support:**
- **Current spousal support:**
- **Other (specify):**

### Total Amount to Withhold

- **$_____**

### Remittance Information

- If the employee/obligor’s principal place of employment is Texas, you must begin withholding no later than the first pay period that occurs on or immediately after the date of delivery. Send payment within two working days of the pay date. If you cannot withhold the full amount of support for any or all orders for this employee/obligor, withhold up to 50% of disposable income. If the obligor is a non-employee, obtain withholding limits from the state or tribal child support agency or court. If the employee/obligor’s principal place of employment is not Texas, obtain withholding instructions, tax requirements, and any allowable employer fees at [www.acf.hhs.gov/programs/cse/](http://www.acf.hhs.gov/programs/cse/) for the employee/obligor’s principal place of employment.
Employer’s Name: 
Employee’s First Name: 
CSE Agency Case Identifier: 
SSN: 
Order Identifier: 

For electronic payment requirements and centralized payment collection and disbursement facility information (State Disbursement Unit [SDU]), see www.acf.hhs.gov/programs/cse/employers/electronic-payments.

Include the Remittance ID with the payment and if necessary this FIPS code: 

Remit payment to:

Return to Sender [Completed by Employer/Income Withholder]. Payment must be directed to an SDU in accordance with 42 USC 666D(b)(5) and 666E or Tribal Payee (see Payments to SDU below). If payment is not directed to an SDU/Tribal Payee or this IWO is not regular in its face, you must check this box and return the IWO to the sender.

Signature of Judge Issuing Official (if Required by State or Tribal law):

Print Name of Judge Issuing Official: 
Title of Judge Issuing Official: 
Date of Signature: 

If the employee-obligor works in a state or for a tribe that is different from the state or tribe that issued this order, a copy of this IWO must be provided to the employee-obligor.

If checked, the employer/income withholder must provide a copy of this form to the employee-obligor.

ADDITIONAL INFORMATION TO EMPLOYER/INCOME WITHHOLDERS

State-specific contact and withholding information can be found on the Federal Employer Services website located at: www.acf.hhs.gov/programs/cse/resource/state-income-withholdings-contact-and-program-information.

Priority: Withholding for support has priority over any other legal process under state law against the same income (42 USC §666D(b)(7)). If a federal tax levy is in effect, please notify the sender.

Combining Payments: When remitting payments to an SDU or tribal CSE agency, you may combine withheld amounts from more than one employee-obligor’s income in a single payment. You must, however, separately identify each employee-obligor’s portion of the payment.

Payments to SDU: You must send child support payments payable by income withholding to the appropriate SDU or to a tribal CSE agency. If this IWO instructs you to send a payment to an entity other than an SDU (e.g., payable to the custodial party, court, or attorney), you must check this box above and return this notice to the sender. Exception: If this IWO was sent by a court attorney, or private individual entity and the initial order was entered before January 1, 1994 or the order was issued by a tribal CSE agency, you must follow the “Remit payment” instructions on this form.

Reporting the Pay Date: You must report the pay date when sending the payment. The pay date is the date on which the amount was withheld from the employee-obligor’s wages. You must comply with the law of the state (or tribal law, if applicable) of the employee-obligor’s principal place of employment regarding time periods within which you must implement the withholding and forward the support payments.

Multiple IWOs: If there is more than one IWO against this employee-obligor and you are unable to fully honor all IWOs due to federal, state, or tribal withholding limits, you must honor all IWOs to the greatest extent possible, giving priority to current support before payment of any past-due support. Follow the state or tribal law/procedure of the employee-obligor’s principal place of employment to determine the appropriate allocation method.

Lump Sum Payments: You may be required to notify a state or tribal CSE agency of upcoming lump sum payments to this employee-obligor such as bonuses, commissions, or vacation pay. Contact the court or the agency to determine if you are required to report and/or withhold lump sum payments.

Liability: If you have any doubts about the validity of this IWO, contact the sender. If you fail to withhold income from the employee-obligor’s income as the IWO directs, you are liable for both the accumulated amount you should have withheld and any penalties set by state or tribal law/procedure.

Anti-discrimination: You are subject to a fine determined under state or tribal law for discharging an employee-obligor from employment, refusing to employ, or taking disciplinary action against an employee-obligor because of this IWO.

OMB Expiration Date — 07/31/2017. The OMB Expiration Date has no bearing on the termination date of the IWO, it identifies the version of the form currently in use.

June 2012
**Child Support Handbook for Employers**

**Employer’s Name:**

**Employee/Obligor’s Name:**

**SSN:**

**Purpose Identifier:**

### Withholding Limits:

You may not withhold more than the lesser of: 1) the amounts allowed by the Federal Consumer Credit Protection Act (CCPA) (15 USC 1673 (b)), or 2) the amounts allowed by the state of the employee-obligor’s principal place of employment or tribal law if a tribal order (see REMITTANCE INFORMATION). Disposible income is the net income after making mandatory deductions such as state, federal, local taxes, Social Security taxes, statutory pension contributions, and Medicare taxes. The federal limit is 50% of the disposable income if the obliger is supporting another family and 60% of the disposable income if the obliger is not supporting another family. However, these limits increase 5% - to 55% and 65% - if the arrears are greater than 13 weeks. If permitted by the state or tribe, you may deduct a fee for administrative costs. The combined support amount may not exceed the limit indicated in this section.

For tribal orders, you may not withhold more than the amounts allowed under the law of the issuing tribe. For tribal employers'/income withholding who receive a tribal PAO, you may not withhold more than the limit set by tribal law.

Depending upon applicable state or tribal law, you may need to consider the amounts paid for health care premiums in determining disposable income and applying appropriate withholding limits.

### Arrears greater than 11 weeks?

If the Order Information does not indicate that the arrears are greater than 12 weeks, then the employer should calculate the CCPA limit using the lower percentage.

**Supplemental information:** Non-employees’ withholding limitations are the same as that for employees under Texas Family Code.

---

### Important:

The person completing this form is advised that the information may be shared with the employee-obligor.

**NOTIFICATION OF EMPLOYMENT TERMINATION OR INCOME STATUS:** If this employee-obligor never worked for you or you are no longer withholding income for this employee-obligor, you must promptly notify the CSE agency and the employer by returning this form to the address listed in the contact information below:

- This person has never worked for this employer and received earnings.
- This person no longer works for this employer but received earnings.

Please provide the following information for the employee-obligor:

- **Termination date:**
- **Last known phone number:**
- **Last known address:**
- **Final payment date to SDU/tribal Payee:**
- **Final payment amount:**

**NEW EMPLOYER INFORMATION**

- **New employer’s name:**
- **New employer’s address:**

**CONTACT INFORMATION**

**To Employer Income Withholder:** If you have any questions, contact by phone at , by fax at , by e-mail or website at [www.employertexasattorneygeneral.gov](http://www.employertexasattorneygeneral.gov)

**Send termination/income status notice and other correspondence to:**

Office of the Attorney General
Child Support Division
Central File Maintenance
P O Box 12949
Austin, TX 78711-2010

**To Employee/Obligor:** If the employee/obligor has questions, contact by phone at , by fax at , by e-mail or website at [http://tasaweb.texasattorneygeneral.gov](http://tasaweb.texasattorneygeneral.gov)

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**The Paperwork Reduction Act of 1995**

This information collection and associated response are conducted in accordance with 45 CFR 303.100 of the Child Support Enforcement Program. This form is designed to provide uniformity and standardization. Public reporting burden for this collection of information is estimated to average 5 minutes per response for Non-IV-D cases: 3 minutes per response for employers: 3 seconds for e-IWO employers, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information.

An agency can not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

OMR 0970-0154

June 2015 Form IN051
Chapter V: Medical Support

General Information

The Texas Family Code (TFC) requires that medical support be ordered by the court for a child involved in any suit affecting the parent-child relationship. If health insurance is available for a child through the employee’s place of employment, the court may order the employee to include the child in the parent’s health insurance. [TFC §§ 154.181, 154.182]

Medical support is a child support obligation and may be enforced by any means available for the enforcement of child support, including withholding from earnings. The amount the employee is ordered to pay as medical support for the child includes the cost of health insurance coverage or cash medical support and is in addition to the amount the employee is required to pay for child support. [TFC § 154.183(a)(1-3)]

Receipt of a medical support order requiring that health insurance be provided for a child shall be considered a change in the family circumstances of the employee or member for health insurance purposes, equivalent to the birth or adoption of a child. [TFC § 154.184(a)]

Employers are required to comply with federal and state requirements to enforce medical support when notified through:

- National Medical Support Notice (NMSN) to enroll a child in health insurance or
- Order/Notice to Withhold Income specified as cash medical support

Unlike income withholding orders, there is no specific statutory authority for employers to charge a processing fee for complying with NMSNs. [TFC § 158.204]

Employer Responsibilities

Once an employer receives an Order/Notice directing health insurance coverage to be provided for a child of an employee, the Order/Notice is binding on a current or subsequent employer regardless of the date of the Order/Notice. If the employee is eligible for dependent health coverage for the child, the employer shall immediately enroll the child in a health insurance plan regardless of whether the employee is enrolled in the plan. [TFC § 154.187(a)]
An employer who has received an order or notice shall provide a response to the sender by first
class mail not later than the 40th day after the date the employer receives the order or notice, if
the child has been enrolled in employer's health insurance plan or is already enrolled in another
health insurance plan in accordance with a previous child support or medical support order to
which the employee is subject. [TFC § 154.187(c)(1)] Employers can notify the Office of the
Attorney General’s Child Support Division (OAG-CSD) that children named on an NMSN have
been enrolled in an employer's health insurance plan or are already enrolled in another health
insurance plan by completing the Other Source Health Insurance Information form found on the
Texas Employer Website.

If additional premiums are incurred as a result of adding the child to the health insurance plan,
the employer shall deduct the health insurance premium from the earnings of the employee and
apply the amount withheld to payment of the insurance premium. [TFC § 154.187(b)]
(Reference Chapter IV: Income Withholding)

Upon request, the employer shall release to the sender of the Order/Notice information
concerning the available health insurance coverage, including:

- Name of health insurance carrier
- Health insurance policy number
- Copy of the policy
- Schedule of benefits
- Insurance membership cards
- Claim forms

[TFC § 154.187(e)]

If an employee ceases employment or if health insurance coverage lapses, the employer shall
provide this information to the sender of the Order/Notice:

- No later than the 7th day after the date of the termination of employment
  [TFC § 158.211] or
- The 15th day after the lapse of health insurance coverage [TFC § 154.189]

✓ Note: The OAG-CSD retains a Medical Support Unit (MSU) to administratively enforce
court-ordered medical support on all cases. MSU responsibilities include monitoring responses to
OAG-issued NMSNs, contacting health insurance carriers and employees to verify employer
responses that children are enrolled in another health insurance plan in accordance with a
previous child support or medical support order, providing health insurance verification results
for further review and assessment, mailing enrollment letters to employers and conducting annual surveys of Texas employers.

Benefits of Medical Support Compliance

The benefits of establishing and enforcing medical support include:

- Reducing, preventing and detecting fraudulent expenditures on subsidized health care programs such as Medicaid
- Preventing enrollment delays or denials in group health plans
- Fostering parental responsibility
- Providing dependent children access to health care on a regular and timely basis

Penalty for Non-Compliance

If an employer fails to enroll a child, fails to withhold or remit premiums or cash medical support, or discriminates in the hiring or employment on the basis of a medical support order or notice, the employer shall be subject to the penalties and fines in Texas Family Code §158.210. [TFC §154.187(g)]

The National Medical Support Notice

The National Medical Support Notice is a standardized form developed by the federal government to give all states and employers one easily recognized form that provides the information needed to enroll children in available health insurance coverage ordered by the court.

Typically, an NMSN is sent to an employer when a state child support enforcement agency initially enforces the employee’s medical support obligation or when an employee with a previously established medical support obligation is newly hired.

The NMSN arrives pre-populated with all the necessary information needed to enroll the named children. An NMSN packet may contain the following forms:

- Cover Letter
- NMSN Part A: Notice to Withhold for Health Care Coverage
- Part A: Employer Response
- Part A: Instructions to Employer
- NMSN Part B: Medical Support Notice to Plan Administrator
• Part B: Plan Administrator Response
• Part B: Instructions to Plan Administrator
• Employer Health Insurance Enrollment
• Health Insurance Status Change Form

The NMSN is a qualified medical child support order (QMCSO, typically pronounced QUAM-SO) and serves as notice to the employer and plan administrator that the employee identified on the document is obligated by a court or administrative child support order to provide health care coverage for the children identified in it. Depending on the court order, an NMSN can be issued for either the noncustodial or the custodial parent. The NMSN replaces any notice or order that the issuing agency had previously served an employer.

By federal statute, an NMSN is deemed a qualified medical child support order.

[29 USC 1169(a)(5)(C)]

Completing Part A Employer Response:

<table>
<thead>
<tr>
<th>If items 1,2,3,4 or 5 apply…</th>
<th>Then…</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Employee named on the NMSN has never been employed by the employer</td>
<td>• Employer is required to:</td>
</tr>
<tr>
<td>• Employer does not offer employees the option of purchasing dependent or family health care coverage as a benefit of employment</td>
<td>o check the appropriate box</td>
</tr>
<tr>
<td>• Employee is among a class of employees not eligible for dependent/family health insurance coverage under any group health plan, not including temporary ineligibility</td>
<td>o complete the Part A: Employer Response as appropriate</td>
</tr>
<tr>
<td>• Employee named on NMSN is no longer employed</td>
<td>o return form to the issuing agency</td>
</tr>
<tr>
<td>• State or federal withholding limitations and/or prioritization prevent withholding from the employee’s income</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>If items 6 or 7 apply…</th>
<th>Then…</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>• Employer is required to:</td>
</tr>
<tr>
<td></td>
<td>o check the appropriate box</td>
</tr>
<tr>
<td></td>
<td>o complete the Part A: Employer Response as appropriate</td>
</tr>
<tr>
<td></td>
<td>o return form to the issuing agency</td>
</tr>
</tbody>
</table>
• Employee is subject to a waiting period
• Employer forwarded Part B to the Plan Administrator

**Note:** Reference Chapter IV: Income Withholding for information about determining the maximum amount to be withheld for support.

• Employer is required to:
  o check the appropriate box
  o complete the rest of the form
  o return it to the issuing agency
  o forward Part B: Plan Administrator Response to the Plan Administrator

Completing Part B Plan Administrator Response:

<table>
<thead>
<tr>
<th>If the employer determines...</th>
<th>Then the plan administrator...</th>
</tr>
</thead>
</table>
| • Health insurance coverage is available for the named children:  
  o employer has 20 business days from the date on the NMSN to send Part B Plan Administrator Response form to the plan administrator or benefits coordinator | • Has 40 business days from the date on the NMSN to:  
  o determine if a waiting period or other contingency must be met before enrollment or  
  o enroll children named in the NMSN into a health insurance plan and return Part B: Plan Administrator Response to the issuing agency [29 USC 1169] |
|                              | • Complete and return Part B to the issuing agency |
|                              | • Notify payroll department of proper premium amount deductions |
|                              | • Maintain Health Insurance Status Change form for employment changes or insurance lapses |

The Employer Health Insurance Enrollment Form must be completed when employers enroll children listed on the NMSN in employer-sponsored health insurance plans, and the Health Insurance Status Change Form should be maintained in records employees keep on their employees. The Health Insurance Status Change Form must be completed and submitted to the OAG when the employee terminates or has a lapse in insurance coverage. If the employee terminates employment, the employer should also report the termination. (Reference Chapter VII: Terminations)
Reporting Methods

NMSNs may be reported several ways. Choose the most convenient option:

- **Online**
- Mail: Medical Support Unit, P.O. Box 1328, Austin, Texas 78767
- FAX: (855) 329-6676

Request to Review or Contest an NMSN

Employers are not authorized to request reviews or contest an NMSN. However, OAG-CSD has a review process for employees to contest NMSNs. Information on how employees can request a review is available on the [OAG website](https://www.texasattorneygeneral.gov).

Employees wanting to challenge the NMSN must do so no later than 30 calendar days from the date of the notice of issuance. During the review process, both the employer and employee must continue to comply with the terms of the NMSN.

Sample Forms

The following forms can be found at the end of this chapter:

- Cover Letter
- Part A Notice to Withhold for Health Care Coverage
  - Part A: Employer Response
  - Part A: Instructions to Employer
- Part B Medical support Notice to Plan Administrator
  - Part B: Plan Administrator Response
  - Part B: Instructions to Plan Administrator
- Employer Health Insurance Enrollment Form
- Health Insurance Status Change Form
- Other Source Health Insurance Information
Frequently Asked Questions

1. Can employers respond to medical support notices online?

   Yes. Employers may respond to National Medical Support Notices online.

2. In what health insurance coverage is an employer required to enroll children?

   Employers should enroll children in a basic health care service plan that covers physician services, office visits, hospitalization, laboratory services, X-rays and emergency services.

3. What if an employer does not have any record of the employee listed in the National Medical Support Notice (NMSN)?

   If the person named in the notice has never been employed by the employer, the employer should check box #1 on Part A: Employer Response form and return the form to the OAG-CSD.

4. What if an employer does not offer health insurance to employees?

   If insurance is not offered to employees, the employer will need to check box #2 on Part A: Employer Response form. OAG-CSD will follow up annually with employers to confirm whether or not health insurance availability has changed.

5. If an employer faxes or mails a National Medical Support Notice (NMSN), should the form also be completed online?

   No. The purpose of the online application is to streamline the process of responding and enrolling dependents in health insurance. It is not necessary for employers who use the online application to complete hard copies. Employers can register to use the medical support application online.

6. What if the employee named on the National Medical Support Notice (NMSN) has a waiting period for health insurance enrollment?

   Depending on the terms of the waiting period, employers will complete Box 6 on Part A or select either box 2D or box 4 on Part B.
7. What if an employer receives the National Medical Support Notice (NMSN), but the employee claims health insurance coverage is being provided from another source?

If the employer learns the employee has the children enrolled in another health insurance plan in accordance with a previous child support or medical support order, the employer should notify OAG-CSD within 30 days of receiving the NMSN by completing the Other Source Health Insurance Information form found on the Texas Employer Website. To obtain more information visit the Texas Employer Website and select “Medical Support” from the top menu bar, then select “Employer Responsibilities.” In addition, the employee should contact his or her local child support office or call the Child Support Call Center at (800) 252-8014 to discuss whether a modification is appropriate.

8. What if the employee refuses to sign medical insurance enrollment forms in order to enroll the dependent in the employer sponsored health insurance plan?

- The employer should proceed with the enrollment, even if the employee will not sign enrollment forms. The employee is entitled to a contest based on “mistake of fact” and must follow the contest procedures found in the Texas Administrative Code at https://www.texasattorneygeneral.gov/files/cs/tac55.120_b.pdf.

9. What if an employer has medical support related questions?

Employers who have medical support questions may contact the Medical Support Unit by phone at (800) 522-2421, or contact the Employer Call Center at (800) 850-6442.

10. Do employers complete Part A: Employer Response and Part B: Plan Administrator Response?

It depends. If the employer responds to 1 through 5 on Part A, Part B is not required. If the employer responds to 6 or 7, the employer should forward Part B to the Plan Administrator. The Plan Administrator will need to complete Part B and send to the issuing agency once the enrollment in health insurance has occurred.

11. When should an employer terminate health insurance coverage? Is there a specific end date?
Unless the court order states otherwise, the health insurance obligation and the child support obligation will end when the child turns 18 or graduates from high school, whichever occurs last. The OAG-CSD will notify the employer when the employee is no longer required by court order to provide health insurance coverage for the child. However, the notice does not instruct the employer to terminate health insurance but merely indicates health insurance coverage may be canceled upon authorization by the employee.

12. What does an employer do when an employee goes on workmen’s compensation and cannot continue to provide health insurance?

If the employee is no longer eligible for employer-sponsored health insurance, coverage should be terminated. The employer should notify the OAG-CSD within 15 days of insurance interruption by completing the Health Insurance Status Change Form.

13. What is the proper way for employers to issue health insurance cards and other medical related documents when the employer does not have the other parent’s address?

If an employer does not have the other parent’s address, the employer should send the health insurance cards and any other necessary policy information to the Medical Support Unit address provided on the National Medical Support Notice (NMSN).

14. What does “reasonable cost” mean?

Reasonable cost is a factor used by the court when ordering a parent to provide health insurance for children. Reasonable cost is not a factor that should be considered by the employer when enrolling children. Even if an employer or employee believes the cost is not reasonable, the employer must follow the order and enroll the children. Employees should be directed to raise reasonable cost concerns with their local child support office or seek a modification to the court order. [TFC § 154.181(e)]

15. What should an employer do when notified a child is on CHIP or Medicaid?

The National Medical Support Notice (NMSN) prevails and is binding on the employer. The children must be enrolled in the employer-sponsored health insurance as indicated on the NMSN. Both Medicaid and CHIP are state-funded health care plans and may provide
secondary benefits to the employer-sponsored health insurance. In most cases, neither is acceptable to fulfill a court-ordered obligation for health insurance coverage.

16. Can an employer charge an employee a processing fee for complying with the National Medical Support Notice (NMSN)?

No.

17. What if the employee does not earn enough money within a period to cover health insurance premiums and child support?

In the state of Texas, health care insurance premiums are a pre-tax deduction from an employee’s gross earnings. The federal law protecting 50 percent of net pay does not apply to health care insurance premiums. [TFC § 158.009, 101.010]

Example: The employee earns $400 a week before deductions. In Texas, it is mandatory to deduct taxes, union dues and health insurance premiums before determining the net (take-home) pay. If taxes for this employee equal $60 per week and the health insurance premiums are $75 a week, the employee is left with $265 as net pay and only $132.50 can be remitted for child support from the employee’s disposable earnings that week. If the employee’s child support is less than that amount, then the employee will be able to fully meet the obligation. If the employee’s child support obligation is greater than that amount, the employee is responsible for the remainder of the obligation in order to keep from accruing arrears, also known as past-due child support.

18. How should employers compute disposable earnings while considering the withholding limit (which in Texas is 50 percent of disposable earnings) and the employee’s cost for health insurance?

The Texas Family Code defines disposable earnings as the part of the earnings of an individual remaining after the deduction from those earnings of any amount required by law to be withheld, union dues, nondiscretionary retirement contributions, and medical, hospitalization, and disability insurance coverage for the obligor and the obligor's children. [TFC § 101.010]

Employer-sponsored health insurance premiums that employees pay to cover themselves and their children should be considered when computing disposable earnings.
Example:

<table>
<thead>
<tr>
<th>If the employee covers…</th>
<th>Then…</th>
</tr>
</thead>
<tbody>
<tr>
<td>Only the employee</td>
<td>Deduct the cost when computing disposable earnings</td>
</tr>
<tr>
<td>The employee and any children</td>
<td>Deduct the cost when computing disposable earnings</td>
</tr>
<tr>
<td>The employee and spouse or employee and family</td>
<td>Deduct the cost when computing disposable earnings</td>
</tr>
<tr>
<td>Only a spouse (not the employee or any children)</td>
<td><strong>Do not</strong> deduct the cost when computing disposable earnings</td>
</tr>
</tbody>
</table>

If the cost of health insurance reaches the withholding limit, employers will not be able to withhold and remit the full child support obligation. Child support, child support arrearage, medical support or medical support arrearage obligations not met due to withholding limits must be paid by the employee through other means.

19. What if an employer receives a National Medical Support Notice (NMSN) without a dependent’s Social Security number?

Social Security numbers (SSN) are not required information in order for the notice to be considered a qualified medical support order. An employer should not refuse to comply with an NMSN based upon the absence of a dependent’s SSN.

20. What should an employer do if the employee works part time and is not eligible for insurance?

Employers should check box #3 on Part A: Employer Response, which states, “The employee is among a class of employees that are not eligible for family health coverage under any group health plan maintained by the employer or to which the employer contributes.”

21. Why do employers receive multiple National Medical Support Notices (NMSNs) for the same employee?

An NMSN is issued for each child support case and the associated children. If an employee has multiple child support cases, employers may receive multiple NMSNs.
22. Who can employers contact if they have additional questions?

The OAG-CSD has an Employer Call Center that operates Monday through Friday from 8 a.m. to 6 p.m. CST. The toll-free number is (800) 850-6442. Listen to all the options before making a selection.
Dear Employer:

Enclosed is a National Medical Support Notice (NMSN) mandated by federal regulations. The employee identified above is obligated by a court or administrative child support order to provide health care coverage for the child(ren) listed on the NMSN.

There are two parts to the NMSN:
- Part A - Notice to Withhold for Health Care Coverage, directs the employer to withhold employee contributions required by the group health plan(s) in which the child(ren) is/are enrolled; and
- Part B - Medical Support Notice to the Plan Administrator, that must be forwarded to the administrator of each group health plan (e.g., medical or dental) to enroll the eligible child(ren).

PLEASE RETURN EITHER THE EMPLOYER AND PLAN ADMINISTRATOR RESPONSE FORMS FROM PART A OR PART B TO THE ADDRESS LISTED BELOW.

The employer’s duties, responsibilities and time frames are addressed in the response forms and instructions that accompany the NMSN. Also enclosed are the following additional forms:
- Employer Health Insurance Enrollment Information Form that must be completed with enrollment information and returned to the address below, and
- Health Insurance Status Change Form that must be completed and returned to the address below when insurance coverage changes or lapses.

When the child(ren) is/are already enrolled in another health insurance plan in accordance with a previous child support or medical support order, access the employers website at https://portal.cs.oag.state.tx.us/wps/portal/MedicalSupportForms to obtain the form to notify the Office of the Attorney General. If this situation occurs, this form is submitted in lieu of a NMSN Part A Response.

Please do not hesitate to contact us at (800) 522-2421 if you have any questions regarding the NMSN.

Sincerely,

Office of the Attorney General
Medical Support Unit
P.O. Box 1328
Austin, TX 78767-1328
Toll-Free (800) 522-2421
Fax (855) 329-6676

Enclosure
**NATIONAL MEDICAL SUPPORT NOTICE - PART A**  
**NOTICE TO WITHHOLD FOR HEALTH CARE COVERAGE**

This Notice is issued under section 466(a)(10) of the Social Security Act, section 606(a)(6)(C) of the Employee Retirement Income Security Act of 1974 (ERISA), and for State and local government and church plans, sections 401(e)(3) and (4) of the Child Support Performance and Incentive Act of 1998 (CSPIA). Receipt of this Notice from the Issuing Agency constitutes receipt of a Medical Child Support Order under applicable law. The information on the Custodial Parent and Child(ren) contained on this page is confidential and should not be shared or disclosed with the employee. NOTE: For purposes of this form, the Custodial Parent may also be the employee when the State opts to enforce against the Custodial Parent.

| Issuing Agency | Office of the Attorney General  
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Child Support Division - Medical Support Unit</td>
</tr>
<tr>
<td>Address</td>
<td>P.O. Box 1328, Austin, Texas 78767-1328</td>
</tr>
<tr>
<td>Notice Date</td>
<td></td>
</tr>
<tr>
<td>Court or Administrative Authority</td>
<td>County, Texas</td>
</tr>
<tr>
<td>Order Date</td>
<td>Order Identifier:</td>
</tr>
<tr>
<td>Document Tracking Identifier:</td>
<td></td>
</tr>
</tbody>
</table>

**RE**  

Employee’s Name (Last, First, MI)

<table>
<thead>
<tr>
<th>Employer/Withholder’s Federal EIN Number</th>
<th></th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Employer/Withholder’s Name</th>
<th></th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Employer/Withholder’s Address</th>
<th></th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Parent’s Name (Last, First, MI)</th>
<th></th>
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<tr>
<th>P.O. Box 1328, Austin, Texas 78767-1328</th>
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<tr>
<th>Sustaining Office/Agency Name</th>
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<tr>
<th>Sustaining Office/Agency Address</th>
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<tr>
<th>Child(ren)’s Name(c)</th>
<th>Gender</th>
<th>DOE</th>
<th>SSN</th>
<th>Child(ren)’s Name(c)</th>
<th>Gender</th>
<th>DOE</th>
<th>SSN</th>
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</table>

- The employee is the child(ren) to be enrolled in [ ] all health coverage available, or only the following coverage(s): 
  - (Medicare) 
  - (Dental) 
  - (Vision) 
  - (Prescription Drug) 
  - (Mental Health) 
  - (Other specify: )

**THE PAPER MARKETING LAW (TEXAS CIVIL PRACTICE AND REMEDIES CODE §§ 171.065-171.068) PROVIDE FOR BURDEN OF INFORMATION AS ALTERNATE TO PENALTY FOR PAPER FORMAT.**

- Employer Name: Non-Custodial Parent:  
  - Non-Custodial Parent SSN:  
  - Bar Code (with FSH):  
  - EAD Card Number:  
  - Case Number:  

<table>
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<tr>
<th>Employer Federal EIN</th>
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**Page 1 of 2**  
**May 2018**
LIMITATIONS ON WITHHOLDING

The total amount withheld for both cash and medical support cannot exceed the applicable Consumer Credit Protection Act (CCPA) percentage (%) of the employee's aggregate disposable weekly earnings. The employer may not withhold more under this National Medical Support Notice than the lesser of:

1. The amounts allowed by the Federal Consumer Credit Protection Act (15 U.S.C., section 167X(b)),
2. The amounts allowed by the State of the employee's principal place of employment, or
3. The amounts allowed for health insurance premiums by the child support order, as indicated here: ______.

The Federal limit applies to the aggregate disposable weekly earnings (ADWE). ADWE is the net income left after making mandatory deductions such as State, Federal, local taxes, Social Security taxes, and Medicare taxes. As required under section 2B.2 of the Employer Responsibilities on page 4, complete item 5 of the Employer Response to notify the Issuing Agency that enrollment cannot be completed because of prioritization or limitations on withholding.

PRIORITY OF WITHHOLDING

If withholding is required for employee contributions to one or more plans under this notice and for a support obligation under a separate notice and available funds are insufficient for withholding for both cash and medical support contributions, the employer must withhold amounts for purposes of cash support and medical support contributions in accordance with the law, if any, of the State of the employee's principal place of employment requiring prioritization between cash and medical support, as described here. Texas law requires that employee contributions for health insurance are withheld first before withholding for cash support (cash child support, cash medical support, or cash spousal support) [TFC § 101.010]. If an employer is faced with two or more NMECNs and cannot comply with all of the notices, the employer should comply with the notices in the order in which they were first received. As required under section 2B.2 of the Employer Responsibilities on page 4, complete item 5 of the Employer Response to notify the Issuing Agency that enrollment cannot be completed because of prioritization or limitations on withholdings.
EMPLOYER RESPONSE

If 1, 2, 3, 4, or 5 below applies, check the appropriate box and return this Part A to the Issuing Agency within 20 business days after the date of the Notice, or sooner if reasonable. NO OTHER ACTION IS NECESSARY. If 1 through 5 does not apply, complete item 7 and forward Part B to the appropriate Plan Administrator(s) within 20 business days after the date of the Notice, or sooner if reasonable. This includes any organization or labor union that provides group health care benefits to the employees. Check number 5 and return this Part A to the Issuing Agency if the Plan Administrator informs you that the child(ren) would be enrolled in or qualified(s) for an option under the plan for which you have determined that the employee contribution exceeds the amount that may be withheld from the employee’s income due to State or Federal withholding limitations and/or prioritization. You are required to respond to the Issuing Agency by returning the Employer Response regardless of whether you provide group health benefits or the employee named herein is no longer employed by your organization. Information for the Plan Administrator and the Employee Representative at the bottom of this section is required.

[ ] 1. The employee named in this Notice has never been employed by this employer.

[ ] 2. We, the employer, do not offer our employees the option of purchasing dependent or family health care coverage as a benefit of their employment.

[ ] 3. The employee is among a class of employees (for example, part-time or non-union) that are not eligible for family health coverage under any group health plan maintained by the employer or to which the employer contributes. Do not check this box if the employee is only temporarily ineligible for health care coverage.

[ ] 4. Health care coverage is not available because employee is no longer employed by the employer.
   Date of termination: __________________________
   Last known telephone number: __________________
   Last known address: ___________________________
   New employer (if known): __________________________
   New employer telephone number: __________________
   New employer address: __________________________

[ ] 5. State or Federal withholding limitations and/or prioritization prevent the withholding from the employee’s income of the amount required to obtain coverage under the terms of the plan.

[ ] 6. The participant is subject to a waiting period that expires __________________ (more than 90 days from the date of receipt of this Notice), or has not completed a waiting period, which is determined by some measure other than the passage of time, such as the completion of a certain number of hours worked (describe here: __________________). At the completion of the waiting period, the Plan Administrator will process the enrollment.

[ ] 7. Employer forwards Part B to Plan Administrator on ____________

CONTACT FOR QUESTIONS

Plan Administrator Name: __________________________
Contact Person: __________________________
Telephone Number: __________________________

Employer Name: __________________________
Employer Representative Name/Title: __________________
Telephone Number: __________________
Federal EIN: __________________________

Employee Name: __________________________
Employee Social Security Number: __________________
Date: __________________

Employer Name: __________________________
Employer Federal EIN: __________________________
Non-Custodial Parent: __________________
Non-Custodial Parent SSN: __________________
Custodial Parent: __________________________
Custodial Parent SSN: __________________

Page 3 of 3
INSTRUCTIONS TO EMPLOYER

This document serves as legal notice that the employee identified on this National Medical Support Notice is obligated by a court or administrative child support order to provide health care coverage for the children identified on this Notice. This National Medical Support Notice replaces any Medical Support Notice that the issuing agency has previously served on you with respect to the employee and the children listed on that Notice.

This document consists of Part A - Notice to Withhold for Health Care Coverage for the employer to withhold any employee contributions required by the group health plan(s) in which the child(ren) is/are enrolled, and Part B - Medical Support Notice to the Plan Administrator, which must be forwarded to the administrator of each group health plan identified by the employer to enroll the eligible child(ren), or completed by the employer, if the employer serves as the health plan administrator.

An employer receiving this legal Notice is required to complete and return Part A. If group health coverage is not available to the employee named herein, or the employee was never or is no longer employed, the employer is still required to complete Part A - Employer Response and return it to the Issuing Agency with the appropriate response checked. If you, the employer, provide the health care benefits to the employee, forward Part B - Plan Administrator Response to the health plan administrator of your organization. If the employee's health care benefits are administered through another organization, including a labor union, forward Part B of the Notice to the labor union or other organization acting as the plan administrator for completion. If the employee has already enrolled the child(ren) in health care coverage, the employer must forward Part B to the plan administrator for completion and submit to the Issuing Agency.

Keep a copy of Part A as it may be used to notify the Issuing Agency if the employee separates from service for any reason including termination or termination.

EMPLOYER RESPONSIBILITIES

1. If the individual named in this Notice is not your employee, or if family health care coverage is not available to the employee named herein, or the employee was never or is no longer employed, the employer is still required to complete Part A - Employer Response and return it to the Issuing Agency. NO OTHER ACTION IS NECESSARY.

2. If family health care coverage is available for which the child(ren) identified above may be eligible, you are required to:
   a. Transfer, not later than 20 business days after the date of this Notice, a copy of Part B - Medical Support Notice to the Plan Administrator to the administrator of each appropriate group health plan for which the child(ren) may be eligible, complete item 7, and
   b. Upon notification from the Plan Administrator(s) that the child(ren) is/are enrolled, either
      1) withhold from the employee's income any employee contributions required under each group health plan, in accordance with the applicable law of the employee's principal place of employment and transfer employee contributions to the appropriate plan(s), or
      2) complete item 5 of the Employer Response to notify the Issuing Agency that enrollment cannot be completed because of prioritization or limitations on withholding,
   c. If the Plan Administrator notifies you that the employee is subject to a waiting period that expires more than 90 days from the date of receipt of Part B of this Notice, or whose duration is determined by a measure other than the passage of time (for example, the completion of a certain number of issues worked), complete item 6 of the Employer Response to notify the Issuing Agency of the enrollment time frame and notify the Plan Administrator when the employee is eligible to enroll in the plan and that this Notice requires the enrollment of the child(ren) named in the Notice in the plan.

Employee Name:

Employer Federal ID:

Non-Custodial Parent:

Non-Custodial Parent SSN:

DOB of child(ren):

SSN of child(ren):

Case Number:

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DURATION OF WITHHOLDING

The child(ren) shall be treated as dependents under the terms of the plan. Coverage of a child as a dependent will end when conditions for eligibility for coverage under terms of the plan no longer apply. However, the continuation coverage provisions of ERISA may entitle the child to continuation coverage under the plan. The employer must continue to withhold employee contributions and may not disenroll (or eliminate coverage for) the child(ren) unless:

1. The employer is provided satisfactory written evidence that:
   a. The court or administrative child support order referred to in this Notice is no longer in effect;
   b. The child(ren) is or will be enrolled in comparable coverage which will take effect no later than the effective date of disenrollment from the plan;

2. The employer eliminates family health coverage for all of its employees.

POSSIBLE SANCTIONS

An employer may be subject to sanctions or penalties imposed under State law and/or ERISA for discharging an employee from employment, refusing to employ, or taking disciplinary action against any employee because of medical child support withholding, or for failing to withhold income, or transfer such withheld amounts to the applicable plan(s) as the Notice directs. Sanctions or penalties may be imposed under State law against an employer for failure to respond and/or for non-compliance with this Notice.

NOTICE OF TERMINATION OF EMPLOYMENT

In any case in which the above employee's employment terminates, the employer must promptly notify the Issuing Agency listed above of each termination. This requirement may be satisfied by sending to the Issuing Agency a copy of Part A with response 4 checked or any notice the employer is required to provide under the continuation coverage provisions of ERISA or the Health Insurance Portability and Accountability Act.

EMPLOYEE LIABILITY FOR CONTRIBUTION TO PLAN

The employee is liable for any employee contributions that are required under the plan(s) for enrollment of the child(ren) and is subject to appropriate enforcement. The employee may contest the withholding under this Notice based on a mistake of fact (such as the identity of the obligor). Should an employee contest the withholding under this Notice, the employer must proceed to comply with the employer responsibilities in this Notice until notified by the Issuing Agency to discontinue withholding. To contest the withholding under this Notice, the employee should contact the Issuing Agency at the address and telephone number listed on the Notice. With respect to plans subject to ERISA, it is the view of the Department of Labor that Federal Courts have jurisdiction if the employee challenges a determination that the Notice constitutes a Qualified Medical Child Support Order.

CONTACT FOR QUESTIONS

If you have any questions regarding this Notice, you may contact the Issuing Agency at the address and telephone number listed on page 1 of this Notice.
PLAN ADMINISTRATOR RESPONSE
(To be completed and returned to the issuing Agency within 40 business days after the date of the Notice, or sooner if reasonable)
Case # ___________________ (to be completed by the issuing agency)

This Notice was received by the plan administrator on ____________________

☐ 1. This Notice was determined to be a “qualified medical child support order” on _____________.
   Complete Response 2 or 3, and 4, if applicable.

☐ 2. The participant (employee) and alternate recipient(s) (child(ren)) are to be enrolled in the following family coverage.
   True __ No __
   The child(ren) is/are currently enrolled in the plan as a dependent of the participant.
   ☐ 3. There is only one type of coverage provided under the plan. The child(ren) is/are included as dependents of the participant under the plan.
   True __ No __
   The participant is enrolled in an option that provides dependent coverage and the child(ren) will be enrolled in the same option.
   ☐ 4. The participant is enrolled in an option that permits dependent coverage that has not been elected; dependent coverage will be provided.

Coverage is effective as of ____________/ __________/ __________ (includes waiting period of less than 90 days from date of receipt of this Notice). The child(ren) have been enrolled in the following option: ____________ Any necessary withholding should commence if the employer determines that it is permitted under State and Federal withholding and/or prioritization limitations.

☐ 5. There is more than one option available under the plan and the participant is not enrolled. The issuing Agency must select from the available options.
   Each child is to be included as a dependent under one of the available options that provide family coverage. If the issuing Agency does not apply within 20 business days of the date this Response is returned, the child(ren) and the participant if necessary, will be enrolled in the plan’s default option, if any:

☐ 6. The participant is subject to a waiting period that expires ____________/ __________/ __________ (more than 90 days from the date of receipt of this Notice), or has not completed a waiting period which is determined by some measure other than the passage of time, such as the completion of a certain number of hours worked (described here: ___________________________________________________________________________). At the completion of the waiting period, the plan administrator will process the enrollment.

☐ 5. This Notice does not constitute a “qualified medical child support order” because:
   ☐ The name of the [ ] child(ren) or [ ] participant is unavailable.
   ☐ The mailing address of the [ ] child(ren) (or a substituted official) or [ ] participant is unavailable.
   ☐ The following child(ren) is/are at or above the age at which dependents are no longer eligible for coverage under the plan.
   ____________________________________________________________________________________
   (insert name(s) of child(ren)).

Plan Administrator or Representative:

Name: __________________________ Telephone Number: __________________________

Title: __________________________ Date: __________________________

Address: __________________________

ISSUING AGENCY:
Office of the Attorney General
Child Support Division - Medical Support Unit
F.O. Box 1326
Austin, Texas 78767-1326
(800) 882-2421

Employee Name: __________________________
Employee Federal ID: __________________________
Employee ID: __________________________
Employee SSN: __________________________
Employee DOB: __________________________
Employee Address: __________________________

HMSS: __________ Disbursed: __________
Case Number: __________________________

Run on: __________

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INSTRUCTIONS TO PLAN ADMINISTRATOR

This Notice has been forwarded from the employer identified above to you as the plan administrator of a group health plan maintained by the employer (or a group health plan to which the employer contributes) and in which the non-custodial parent/participant identified above is enrolled or is eligible for enrollment.

This Notice serves to inform you that the non-custodial parent/participant is obligated by an order issued by the court or agency identified above to provide health care coverage for the child(ren) under the group health plan(s) as described on Part B.

(A) If the participant and child(ren) and their mailing addresses (or that of a Substituted Official or Agency) are identified above, and if coverage for the child(ren) is or will become available, this Notice constitutes a "qualified medical child support order" (QMCSO) under ERISA or CSPIA, as applicable. (If any mailing address is not present, but is reasonably accessible, this Notice will not fail to be a QMCSO on that basis.) You must, within 40 business days of the date of this Notice, or sooner if reasonable:

1. Complete Part B - Plan Administrator Response - and send it to the Issuing Agency.

(a) if you checked Response 2:

(i) notify the non-custodial parent/participant named above, each named child, and the custodial parent that coverage of the child(ren) is or will become available (notification of the custodial parent will be deemed notification of the child(ren) if they reside at the same address);

(ii) furnish the custodial parent a description of the coverage available and the effective date of the coverage, including, if not already provided, a summary plan description and any forms, documents, or information necessary to effectuate such coverage, as well as information necessary to submit claims for benefits;

(b) if you checked Response 3:

(i) if you have not already done so, provide to the Issuing Agency copies of applicable summary plan descriptions or other documents that describe available coverage including the additional participant contribution necessary to obtain coverage for the child(ren) under each option and whether there is a limited service area for any option;

(ii) if the plan has a default option, you are to enroll the child(ren) in the default option if you have not received an election from the Issuing Agency within 30 business days of the date you returned the Response. If the plan does not have a default option, you are to enroll the child(ren) in the option selected by the Issuing Agency.

(c) if the participant is subject to a waiting period that expires more than 90 days from the date of receipt of this Notice, or has not completed a waiting period whose duration is determined by a measure other than the passage of time (for example, the completion of a certain number of hours worked), complete Response 4 on the Plan Administrator Response and return to the employer and the Issuing Agency, and notify the participant and the custodial parent; and upon satisfaction of the period or requirement, complete enrollment under Response 2 or 3, and

Employer Name:

Non-Custodial Parent:

Employer Federal EIN:

Non-Custodial Parent SSN:

DBA Code (with PTIN):

PSN:

OAG Case Number:

Case Number:
(d) upon completion of the enrollment, transfer the applicable information on Part B - Plan Administrator Response to the employer for a determination that the necessary employee contributions are available. Inform the employer that the enrollment is pursuant to a National Medical Support Notice.

(B) If within 40 business days of the date of this Notice, or sooner if reasonable, you determine that this Notice does not constitute a QMCSO, you must complete Response 3 of Part B - Plan Administrator Response and send it to the Issuing Agency, and inform the non-custodial parent/participant, custodial parent, and child(ren) of the specific reasons for your determination.

(C) Any required notification of the custodial parent, child(ren) and/or participant may be satisfied by sending the party a copy of the Plan Administrator Response, if appropriate. You may choose to furnish these notifications electronically in accordance with the requirements of the Department of Labor’s electronic disclosure regulation codified at 29 C.F.R. 2330.1046-1(c).

**UNLAWFUL REFUSAL TO ENROLL**

Enrollment of a child may not be denied on the ground that: (1) the child was born out of wedlock; (2) the child is not claimed as a dependent on the participant’s Federal income tax return; (3) the child does not reside with the participant or in the plan’s service area; or (4) because the child is receiving benefits or eligible to receive benefits under the State Medical plan. If the plan requires that the participant be enrolled in order for the child(ren) to be enrolled, and the participant is not currently enrolled, you must enroll both the participant and the child(ren). All enrollments are to be made without regard to open season restrictions.

**PAYMENT OF CLAIMS**

A child covered by a QMCSO, or the child’s custodial parent, legal guardian, or the provider of services to the child, or a state agency to the extent assigned the child’s rights, may file claims and the plan shall make payment for covered benefits or reimbursement directly to such party.

**PERIOD OF COVERAGE**

The alternate recipient(s) shall be treated as dependents under the terms of the plan. Coverage of an alternate recipient as a dependent will end when similarly situated dependents are no longer eligible for coverage under the terms of the plan. However, the continuation coverage provisions of ERISA or other applicable law may entitle the alternate recipient to continue coverage under the plan. Once a child is enrolled in the plan as directed above, the alternate recipient may not be disenrolled unless:

1. The plan administrator provides satisfactory written evidence that either:
   - (a) the court or administrative child support order referred to above is no longer in effect, or
   - (b) the alternate recipient is or will be enrolled in comparable coverage which will take effect no later than the effective date of disenrollment from the plan.

2. The employer eliminates family health coverage for all its employees, or

3. Any available continuation coverage is not elected, or the period of such coverage expires.
CONTACT FOR QUESTIONS

If you have any questions regarding this Notice, you may contact the Issuing Agency at the address and telephone number listed below.

**Paperwork Reduction Act Notice**

The Issuing Agency asks for the information on this form to carry out the law as specified in the Employee Retirement Income Security Act or the Child Support Performance and Incentive Act, as applicable. You are required to give the Issuing Agency the information. You are not required to respond to this collection of information unless it displays a currently valid OMB control number. The Issuing Agency needs the information to determine whether health care coverage is provided in accordance with the underlying child support order. The average time needed to complete and file the form is estimated below. These times will vary depending on the individual circumstances.

<table>
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<tr>
<th>Learning about the law or the form</th>
<th>Preparing the form</th>
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<tr>
<td>First Notice</td>
<td>1 hr.</td>
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<td>Subsequent Notices</td>
<td>1 hr., 45 min.</td>
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<td>20 min.</td>
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**ISSUING AGENCY:**

Office of the Attorney General
Child Support Division - Medical Support Unit
P.O. Box 1328
Austin, Texas 78767-1328
(800) 522-2421

**Employer Name:**

**Employer Federal EIN:**

**Non-Custodial Parent:**

**Parental Custody:**

**Parental Support:**

**Child Support:**

**Case Status:**

**Case Number:**
**EMPLOYER HEALTH INSURANCE ENROLLMENT**

Please provide this agency with the information requested below regarding your employees and submit this form to the address above.

**Texas Family Code, Section 154.187 requires that you reply within 40 business days after the date of the notice, or sooner if reasonable.**

***Once received, send copies of: Health Insurance policies, Schedules of benefits, Insurance membership cards and Claim forms to the MEDICAL SUPPORT UNIT, P.O. Box 1328, Austin, TX 78767-1328.***

In the "Enroll" column, CIRCLE "Y" if the child is enrolled in a health insurance plan; "N" if the child cannot be enrolled in a health insurance plan and provide the reason:

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<tr>
<th>Enroll (Y/N)</th>
<th>Child's Name</th>
<th>DOB</th>
<th>SSN</th>
<th>Enrollment Date</th>
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<td>N</td>
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Select one of the following:

___ a. The child(ren) is/are currently enrolled in the plan as a dependent of the participant.
___ b. There is only one type of coverage provided under the plan. The child(ren) is/are included as dependents of the participant under the plan.
___ c. The participant is enrolled in an option that is providing dependent coverage and the child(ren) will be enrolled in the same option.
___ d. The participant is enrolled in an option that permits dependent coverage that has not been elected; dependent coverage will be provided.

Employer Contact Information: ___________________________ Title: ___________________________

Telephone Number: ___________________________ Email: ___________________________

The participant (employee) and dependents (alternate recipients) are to be enrolled in the following family coverage with the following carrier(s) information. Identify the type(s) of coverage for each insurance carrier.

Name Of Insurance Carrier: ___________________________ Telephone Number: ___________________________

Group Number: ___________________________ Policy Number: ___________________________

Address: ___________________________

Mark the coverages provided by the policy with an "X":

___ Medical ___ Dental ___ Vision ___ Prescription Drug ___ Mental Health ___ Other:

Name Of Insurance Carrier: ___________________________ Telephone Number: ___________________________

Group Number: ___________________________ Policy Number: ___________________________

Address: ___________________________

Mark the coverages provided by the policy with an "X":

___ Medical ___ Dental ___ Vision ___ Prescription Drug ___ Mental Health ___ Other:
HEALTH INSURANCE STATUS CHANGE FORM

Employers are required to notify the Office of the Attorney General of a change of status of an employee [Texas Family Code, 154.187 and 150.211. Please keep this form for use as needed. If there is a change in the employee’s health insurance or employment status, please complete this form and return it to:

Medical Support Unit
P.O. Box 1328
Austin, TX 78767-1328

If you have any questions, please call (800) 322-2421. For information about providing this information via the Internet, please visit www.employer.texasattorneygeneral.gov.

Obigor: Social Security Number:

Date of occurrence: Attorney General Case #:
This is to advise of a change in employment status between the above obligor and this employer

[ ] The obligor is no longer employed by this employer; income withholding will stop on ____________________
(Notification of withholding interruption must be made within 7 days.)

The obligor’s last known home address: The obligor’s new employer name and address if known:

____________________________________________________________________________________
____________________________________________________________________________________

Telephone Number:

[ ] Health insurance coverage has lapsed.

Notification of insurance interruption must be within 15 days of occurrence.

If the obligor is eligible for health insurance conversion privileges (COBRA), please enclose information.

Signature of Person Completing Form Date Form Completed

Position/Title (Area Code) Telephone Number

Internet/Web Address

November 2014
## OTHER SOURCE HEALTH INSURANCE INFORMATION

Please provide this agency with the information requested below regarding your employee (obligor) within 20 business days after the date of the notification, or sooner, if reasonable.

**PLEASE RETURN THIS FORM TO THE ADDRESS LISTED ABOVE**

---

<table>
<thead>
<tr>
<th>Child Name</th>
<th>DOB</th>
<th>SSN</th>
<th>Enrollment Date</th>
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Complete the following for all children that have health insurance from another source:

If any of the items below are unknown, provide the employee’s address and phone number:

Mark the item(s) (with an “X”) to indicate the type of coverage provided:

- Medical
- Dental
- Vision
- Prescription Drug
- Mental Health
- Other (specify):

Name of Insurance Carrier: 
Name of Group: 
Group Number: 
Policy Number: 
Address: 
City: 
State: 
ZIP Code: 
Telephone Number: 

Do you currently withhold child support related wages from this employee?  

---

Employer: (Last Name) (First Name)  
Date form completed:  
Position Title: 
Telephone Number:  
Email Address: 

---

Date valid insurance confirmed:  
FOR OAG VENDOR ONLY

November 2014
Chapter VI: The State Disbursement Unit and Payment Submissions

General Information

The 1996 amendments to the federal laws and regulations applicable to the IV-D child support program required all states to establish a central location for processing child support payments. The purpose was to provide employers with a single location in each state to remit child support withholdings, improve the accuracy of child support records and expedite the processing of payments. The Texas State Disbursement Unit (SDU) processes:

- All payments on cases enforced by the OAG (“full-service” IV-D cases)
- All payments on cases where the child support order was rendered on or after Jan. 1, 1994, and are subject to income withholding (“registry-only” IV-D cases)
- Payments on cases before 1994 for 167 counties that have entered into a registry conversion agreement with the OAG-CSD

The federal mandate requires states to:

- Identify payments accurately
- Disburse payments within two business days of receipt
- Provide, upon request, a timely record of all payments made through the Texas SDU

A Notice of Place of Payment may be used to redirect child support payments from a local registry to the Texas SDU. The OAG-CSD and some counties issue this notice to employers informing them that child support is to be paid to the Texas SDU. The notice may also be included with the Income Withholding Order/Notice. Submitting child support payments to the location specified in the Income Withholding Order/Notice is crucial. [TFC §158.203 (d)]

The address for the Texas SDU is: Texas State Disbursement Unit, P.O. Box 659791, San Antonio, TX 78265-9791.

Every Income Withholding Order/Notice provides additional information for submitting the support withheld:

- Name and address of the payment agency
- Employee/obligor’s case identifier
- Person or entity, e.g., Texas Department of Family and Protective Services, payments are to be made payable
For each payment sent to the payment agency, an employer must include the:

- OAG-CSD case number
- Name of the employee (obligor or noncustodial parent) and Social Security number
- Name of the person entitled to support (obligee or custodial parent)
- Name of the county or the county’s federal information processing code
- Cause number, if available
- Date the support was withheld

The OAG-CSD, court clerks and other payment registries may use case numbers unique to the specific registry. The OAG-CSD uses the 10-digit case number as the “case identifier” and the cause number as the “order identifier” on the Income Withholding Order/Notice. For those employers utilizing electronic funds transfer (EFT), the remittance identifier is located on the income withholding order (IWO). The remittance identifier can be used for the addenda record (DED) and consists of a total of 20 alpha-numeric characters. The first 10 characters will be the OAG-CSD case number, followed by the first 10 characters of the court cause number truncated with no special characters. Refer to the Order/Notice for the correct remittance identifier, order identifier and CSE agency case identifier. When in doubt, contact the payment agency stated in the Order/Notice.

Time Frames

Employers must send the amount withheld from an employee for child support on each pay date it is withheld. If the child support payment is sent electronically, it must be sent no later than the second business day after the pay date. [TFC § 158.203 (b)]

In 2009 the Texas Legislature passed a law mandating any employer with 250 or more employees to remit child support payments by electronic funds transfer or electronic data interchange. This law was amended during the 2011 legislative session and currently mandates any employer with 50 or more employees to remit child support payments by EFT or electronic data interchange not later than the second business day after the pay date on which the funds were withheld. [TFC § 158.203 (b)]

Payment Submission Options

The following options are available for submitting child support payments to the OAG-CSD:

Option 1: Electronic funds transfer using CCD+ or CTX (820) to transmit child support payments and information electronically
Option 2: *SMART e-Pay* (bank draft) is a free web-based solution for employers to submit child support withholdings. The *SMART e-Pay* solution is similar to a bank draft since it debits your company’s bank account each pay period and transfers the funds to the Texas SDU.

Option 3: Individual check with all case information on the face of the check.

Option 4: Individual check with multiple employees/obligors using the Employer Processing Form.

Option 1 – Electronic Funds Transfer

Electronic funds transfer allows employers to make payments within the Automated Clearing House (ACH) network to transfer child support payments and information electronically. EFT saves employers time and money because it reduces data-entry errors as well as postage and handling costs. EFT supports:

- The corporate credit and debit plus (1) addenda record (CCD+) format or Corporate Trade Exchange (CTX 820) plus (9,999) addenda records.
- The standard addenda record (record 7) format used for child support, known as the “DED”.

**Note:** The remittance identifier is located on the Order/Notice.

Employers can take two steps to use EFT for quicker, easier child support withholding:

**Step 1:** Contact the appropriate state child support agency.

- This is not always the child support agency in the state where the employer resides. It is the agency in the state that collects child support from the employee, i.e., the state to which the employer sends the withheld income.

- Find out the EFT/EDI start-up procedures in the state to which the withheld income is sent. **Do not transmit child support withholdings electronically without that information.**

**Step 2:** Use the EFT/EDI start-up procedures for each state to which child support income withholdings are sent. The start-up procedures typically include:
• An exchange of basic banking information, bank routing codes, bank account numbers, and Federal Information Processing Standards (FIPS) code information with the state child support agency

• A reconciliation between state records and employer records of Social Security numbers and case identification numbers so that each employee’s withholdings are properly credited

• Transmission of an initial test file, or pre-note, to ensure that Automated Clearing House records are formatted and transmitted properly

The initial effort required to begin using EFT is well worth it. Employers who switch to electronic payments have lower costs, fewer errors and faster processing. With EFT, children receive the child support they deserve and need more quickly.

✓ Note: Employers can obtain free Automated Clearing House software. This software allows employers to create an ACH file for submission to their financial institution as a credit transaction to the Texas SDU. The software allows for manual entry or for an upload of employee withholding information from either Excel or CSV files so a large volume of payments can easily be sent electronically. Texas SDU staff who handle EFT submissions are available to assist with any problems setting up or using this software. For a free copy of the software or assistance with installation or use, contact the EFT outreach specialist or email the Texas SDU.

Option 2 – Internet SMART e-Pay (bank draft)

SMART e-Pay is a free web-based solution for employers to submit child support withholdings. SMART e-Pay debits your company’s bank account each pay period and transfers the funds to the Texas State Disbursement Unit (SDU).

Initially, the employer must enter the child support withholding information one time. To find out more information, or register for this service, go to https://tx.smartchildsupport.com.

Option 3 – Individual Check with All Case Information on the Face of the Check

When using this option, submit an individual check for each employee and include the following on the face of the check or on the statement that accompanies the check:

• OAG case number/order identifier
• Obligor’s/employee’s name
• Date of withholding

Check Example 1
Example 1 is a payment from an employer who remits individual checks. The check should be made payable to the Texas SDU if mailed directly to San Antonio. If the payment is mailed to the county, follow the order or contact the local registry for additional information.

Option 4 - Individual Check with Multiple Employees/Obligors Using the Employer Processing Form

An employer who submits one check for multiple employees must:

- Prepare the check with the total dollar amount for all employees/obligors
- Balance the amount of the check on the Employer Processing Form
- Make the check payable to the agency indicated in the most current Order/Notice
- Mail the payment with the Employer Processing Form (print format or Excel format)

Check Example 2

Example 2 is a payment from an employer who submits one check for multiple employees. The Texas SDU Employer Processing Form should accompany check example 2. Make the check payable to the Texas SDU, if mailed directly to San Antonio.

Remember, employers cannot include payments mailed to counties in this type of check. In this instance, employers should follow the order or contact the local registry for additional information.
ANYWHERE RUG CLEANERS
219 WEST STREET
ANYWHERE, TX 78089

<table>
<thead>
<tr>
<th>Code</th>
<th>Department</th>
<th>File No.</th>
<th>Check No./ID</th>
<th>Social Security No.</th>
<th>Pay Date</th>
<th>Check No.</th>
</tr>
</thead>
<tbody>
<tr>
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<td></td>
<td></td>
<td></td>
<td></td>
<td>31345</td>
<td>3588</td>
</tr>
</tbody>
</table>

Pay this amount:
***THREE HUNDRED EIGHTY AND 00 DOLLARS***

Net Pay
**********180.00

To the order of
COMMERICAL SAVINGS
ANYWHERE, TEXAS

Multiple Obligors
P.O. Box 859791
San Antonio, TX 78265-9791

"00088888" 00001111 "333"
Example of the Texas State Disbursement Unit Employer Processing Form:

<table>
<thead>
<tr>
<th>Texas State Disbursement Unit Employer Processing Form</th>
</tr>
</thead>
<tbody>
<tr>
<td>Company Name:</td>
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</tr>
<tr>
<td>Company Phone:</td>
</tr>
<tr>
<td>Company Fax:</td>
</tr>
<tr>
<td>Date of Withholding:</td>
</tr>
<tr>
<td>Employer/Obligor Case Identifier (10 Digits)</td>
</tr>
<tr>
<td>Cause Number:</td>
</tr>
<tr>
<td>Obligor/Employee Name:</td>
</tr>
<tr>
<td>Obligor’s SSN#:</td>
</tr>
<tr>
<td>Amount:</td>
</tr>
<tr>
<td>Total: $</td>
</tr>
</tbody>
</table>

Cancelling a Payment Submission

The need may arise for employers to issue a stop payment on a submission. For example:

- An employer’s check did not clear the employer’s bank account
- A check has been issued in error

If these situations or other problems occur with a payment that has been submitted, contact the Employer Call Center at (800) 850-6442 as soon as possible to find a resolution. Do not stop the payment prior to contacting the OAG to prevent further delays.
Sample Forms

The following forms can be found at the end of this chapter:

- Texas State Disbursement Unit Employer Processing Form (print format)
Frequently Asked Questions

1. Are payment coupons available?

   No, payment coupons are no longer available. Employers who send checks are encouraged to provide information required for payment processing as shown in check examples. To save time and money, employers should submit child support payments electronically.

2. Are there other acceptable payment methods for child support?

   Yes. Third-party payroll providers offer several methods for paying support, including electronic payment submission or check issuance. For additional information, contact the Employer Call Center at (800) 850-6442.

3. When should an employer submit payments?

   Employers must send in the amount withheld on each pay date. For payments made by electronic funds transfer or electronic data interchange, an employer must send the amount withheld no later than the second business day after the pay date.

4. What does ACH mean?

   Automated Clearing House (ACH) is the electronic funds network governed by the rules of the National Automated Clearing House Association (NACHA) to remit payments and payment information electronically.

5. What does NACHA mean?

   NACHA stands for National Automated Clearing House Association and is an acronym for the Electronic Payment Association that establishes rules and guidelines governing the formats, specifications and exchange of ACH entries. For additional information on NACHA, visit the website.

6. What security risks are associated with using electronic funds transfer (EFT)?
As long as the solution an employer selects uses security technologies providing the minimum level of security equivalent to 128-bit RC4 encryption technology, the EFT payment is considered secure. National Automated Clearing House Association (NACHA) rules require all entries going through Automated Clearing House (ACH) operators to be a minimum of 128-bit RC4 encryption to be considered commercially reasonable security.

7. What Automated Clearing House (ACH) formats do state disbursement units (SDU) accept?

As of Sept. 30, 1997, all SDUs are required to accept employer-originated child support withholding payments sent in the CCD+ format. Although an increasing number of states accept the CTX 820 format, it is always best to confirm which format a state can accept. Both the CCD+ and CTX 820 include the addenda record to support the information needed to post a payment.

8. What is a remittance identifier?

A remittance identifier consists of a total of 20 alpha-numeric characters. The first 10 characters will be the OAG case number, followed by the first 10 characters of the court cause number truncated with no special characters. Employers must include a remittance identifier when sending payments for an income withholding order (IWO).

9. Why is a remittance identifier needed?

A remittance identifier is needed as the case identifier on the electronic funds transfer/electronic data interchange (EFT/EDI) record.

10. Is electronic funds transfer (EFT) faster than mailing the payment?

Yes, in most cases. EFT payments normally take approximately two business days to arrive at the Texas State Disbursement Unit (SDU).

11. How can an employer verify that the Texas State Disbursement Unit (SDU) has received a payment?
To verify a payment, contact the Employer Call Center at (800) 850-6442.

12. What are the benefits of remitting via electronic funds transfer (EFT)?

Employers who remit their child support payments through EFT can reduce their administrative burden, avoid postage costs, increase data accuracy and provide security of the payments. Best of all, child support payments submitted through EFT reach families more quickly.

13. Where can an employer obtain the Texas State Disbursement Unit (SDU) banking information to start remitting payments?

Texas requires case reconciliation to be completed before releasing the banking information. Employers can obtain additional information on the reconciliation process from the Employer Call Center at (800) 850-6442.

14. What is the FIPS code for Texas?

The Federal Information Process Standard (FIPS) code for Texas is 48000.

15. What can an employer do to stop payment on a submitted payment?

Employers who must request a stop payment can contact the Employer Call Center at (800) 850-6442 as soon as the issue is known.

The following are examples of situations that may require a stop payment:

- A check has not cleared the employer’s bank account
- A check is issued in error
- The employee is no longer working for the employer

16. Who can employers contact if they have additional questions?
The OAG-CSD has an Employer Call Center that operates Monday through Friday from 8 a.m. to 6 p.m. Central Time. The toll-free number is (800) 850-6442. Listen to all the options before making a selection.
<table>
<thead>
<tr>
<th>Texas State Disbursement Unit</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employer Processing Form</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Company Name:</th>
<th>Contact Person:</th>
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<tbody>
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</table>

<table>
<thead>
<tr>
<th>Date of Withholding:</th>
<th>Company Phone:</th>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Employee/Obligor Case Identifier (10 Digits)</th>
<th>Cause Number</th>
<th>Obligor/Employee Name</th>
<th>Obligor’s SSN#</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
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</table>

Total | $  -  |
Chapter VII: Terminus

General Information

Employers are required to report the termination date of an employee who is subject to a wage withholding order to the custodial parent, the court of jurisdiction or the Title IV-D agency. Employers must deduct child support according to the Income Withholding Order/Notice until the employee no longer works for that employer. Income earned up to the termination date and any other compensation is subject to withholding for the month in which it was paid.

What to Report

The following four data elements are required:

1. Employer name and Federal Employer Identification Number (FEIN)
2. OAG-CSD 10-digit case number or the employee’s Social Security number (SSN)
3. Employee name
4. Termination date

The Office of the Attorney General’s Child Support Division (OAG-CSD) requests the following additional information to help in locating noncustodial parents (if known):

- Employee last known address
- Name and address of new employer
- Court cause number

Reporting Time Frames

Employers must report the termination of employees who have received an income withholding order from the OAG within seven days of the termination date. In addition to reporting the termination date, provide the employee’s last known address and the name and address of the obligor’s new employer, if known. [TFC § 158.211 (a)]

Employers who have never reported terminated employees need to report only those employees who have been terminated within the past 60 days.
Reporting Methods

Termination information may be reported several ways. Choose the most convenient option:

- **Online** – Submission through the [Texas Employer Website](#).
- **Data Transfer System (DTS)** – File uploads using the Excel spreadsheet (XLS) or text record format (TXT) available through the Texas Employer Website.
- **Mail** – Send a hard copy of the standard Notice of Termination form or complete and send the back of the Income Withholding Order/Notice to:
  
  Office of the Attorney General  
  Central File Maintenance  
  P. O. Box 12048  
  Austin, TX 78711-2048

**Note:** Employers who receive a National Medical Support Notice (NMSN) for a terminated employee must also complete the Health Insurance Status Change Form. The Health Insurance Status Change Form is available in the Medical Support chapter under “Sample Forms” or through the Texas Employer Website.

Reporting Electronically

Submitting terminations electronically saves time and money, and ensures the system is updated promptly and accurately. In addition, the electronic features allow employers to view a history of reported employees.

**Note:** Employers must be registered users on the Texas Employer Website to take advantage of the electronic process.

There are two ways to submit terminations electronically:

1. **Online** – Submit employees’ names individually or work from a list of active employees.
2. **Data Transfer System** – Upload files with the Excel spreadsheet (XLS) or text record format (TXT). Both file formats are available through the Texas Employer Website.

**Note:** The data transfer system is recommended for companies with child support orders for 500 or more employees.

Employers who have questions about reporting electronically should contact technical support staff at the Texas New Hire Operations Center at (800) 850-6442.
Sample Forms

The following forms can be found at the end of this chapter:

- Notice of Termination of Employment Form
- Termination Record Format for uploading “TXT” files via DTS
Frequently Asked Questions

1. Should all terminated employees be reported?

No. Employers only need to report the termination of employees who have received an Income Withholding Order from the OAG-CSD. The terminated employees must be reported within seven days of the termination date.

2. If an employer has never reported terminations on the Texas Employer Website, does the employer need to report all terminated employees?

No. Only report terminated employees who have an Income Withholding Order from the OAG-CSD and have not been reported within the last 60 days.

3. May employers fax termination reports?

No. Terminations should be submitted online using the Texas Employer Website or mailed to:

   Central File Maintenance
   P.O. Box 12048
   Austin, TX  78711-2048

4. Is responding to notice of terminations electronically faster and easier than responding manually?

Yes. When reporting terminations electronically, updates are made the following business day compared to submitting terminations manually, which can take up to five to seven business days.

5. How can employers report terminations electronically?

The first step is to register for a user account to the Texas Employer Website. Once a user account and password have been established, log in to Terminations and then click [Online Reporting].

6. When will terminations that were reported electronically be cleared from the work list?
Termination records will be cleared from a work list the next business day.

7. If an employer previously received a National Medical Support Notice (NMSN) for an employee who is to be reported as terminated and completed the Health Insurance Status Change Form in the NMSN packet, does the employer still have to report the termination?

Yes. Employers who have previously received an NMSN must complete the Health Insurance Status Change Form as well as report the employee as terminated using one of the reporting options.

8. Who can employers contact if they have additional questions?

The OAG-CSD has an Employer Call Center that operates Monday through Friday from 8 a.m. to 6 p.m. Central Time. The toll-free number is (800) 850-6442. The Employer Call Center can answer questions about terminations. For additional questions, listen to all the options before making a selection.
NOTICE OF TERMINATION OF EMPLOYMENT

Pursuant to Texas Family Code § 159.211(a), an employer is required to notify the court or the Child Support Division of the Office of the Attorney General of Texas (Title IV-D agency) not later than the seventh (7th) day after the date an employee/obligor, for whom income has been withheld for support, terminates employment. The employer is also required to provide the obligor’s last known address, and the name and address of the obligor’s new employer, if known.

### Employee’s (Obligor’s) Information

<table>
<thead>
<tr>
<th>Employee’s SSN:</th>
<th>Employee’s Name:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date of Termination:</td>
<td>Court Cause#:</td>
</tr>
<tr>
<td>Employee’s Last Known Address: Address Line 1</td>
<td></td>
</tr>
<tr>
<td>Address Line 2</td>
<td></td>
</tr>
<tr>
<td>City:</td>
<td>State:</td>
</tr>
</tbody>
</table>

Name and Address of Employee’s New Employer (if known):

| Address Line 1 |
| Address Line 2 |
| City: | State: | Zip code: |

### Information about Employer Completing This Form

| Name and Address of Employer: Address Line 1 |
| Address Line 2 |
| City: | State: | Zip Code: |

Name and Telephone Number of Person Completing Form:

<table>
<thead>
<tr>
<th>Contact Name:</th>
<th>Area Code:</th>
<th>Number:</th>
</tr>
</thead>
</table>

After completion, please mail this form to:

Office of the Attorney General
Central File Maintenance
P.O. Box 12148
Austin, TX 78711-2048

Or report online at www.employee.texasattorneygeneral.gov
## Termination Record Format

<table>
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<th>Field Name</th>
<th>Type</th>
<th>Length</th>
<th>Start Position</th>
<th>End Position</th>
<th>Required/Optional</th>
<th>Format/Default values</th>
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<tbody>
<tr>
<td>FEN</td>
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<td>9</td>
<td>1</td>
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<td>Employer Name</td>
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<td>Employer Phone</td>
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<td>Employer Phone Extension</td>
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<td>Employee Date of Termination</td>
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<td>8</td>
<td>163</td>
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<tr>
<td>NCP Forwarding Address1</td>
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<td>50</td>
<td>171</td>
<td>220</td>
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<tr>
<td>NCP Forwarding Address2</td>
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<td>50</td>
<td>221</td>
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<td>271</td>
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<td>NCP Forwarding Postal</td>
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</tr>
<tr>
<td>New Employer Name</td>
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</tr>
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<td>538</td>
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</tbody>
</table>
Chapter VIII: Third-Party Agents

General Information

Employers often hire third-party agents to respond on behalf of their company to the Office of the Attorney General’s Child Support Division (OAG-CSD) regarding their child support responsibilities. Employers may choose a third-party agent to handle one or a combination of these responsibilities and must adhere to the same standards required of employers, including registering to use the Texas Employer Website. A third-party agent also may report for one or more clients.

Third-Party Authorization and Responsibilities

To protect confidential data and access to the Texas Employer Website, the OAG-CSD requires employers to submit written authorization when a third-party agent is hired to perform any of the following responsibilities on behalf of an employer:

- Report new hires or rehires
- Respond to verifications of employment
- Withhold payments according to Income Withholding Orders/Notices
- Respond to National Medical Support Notices
- Enroll dependent children in health care coverage when ordered by the court
- Remit payments
- Notify the OAG-CSD regarding lump sum payments of $500 or more
- Report terminated employees with Income Withholding Orders/Notices

Written Authorization for Third-Party Agents

Written authorization for third-party agents must be submitted to the OAG-CSD using one of the following methods:

- Employer Letterhead – Submission on the employer’s letterhead authorizing the third-party agent to report for the employer. The letter must contain: signature of the employer, employer’s legal name and Federal Employer Identification Number (FEIN) of both the third-party agent and the employer.
• Employer Authorization for Third-Party Reporting form – Form must be completed by the employer and contain the signature of an authorized person. Return the completed form to the OAG-CSD mailing address on the form or email the form to the Child Support Division’s employer liaison.

The written authorization remains in effect until the OAG-CSD receives the revocation of authorization from either the employer or the third-party agent.

Revocation of Authorization for Third-Party Reporting

The third-party agent will have the authority to report to the OAG-CSD once the written authorization form has been submitted. This access will continue until the OAG-CSD is notified to revoke the authorization.

The Revocation of Third-Party Reporting form can be completed by either the employer or the third-party agent and must contain the signature of an authorized person. Return the completed form to the OAG mailing address on the form, or email the form to the Child Support Division’s employer liaison.

Frequently Asked Questions

1. Why is it necessary to complete a form in order to have a third-party agent report my new hires?

   The OAG takes protecting each company’s information very seriously. The advancement of technology has been a beneficial tool in providing and receiving data. Unfortunately, the advancement of technology has also resulted in illegal access of personal data; therefore, to ensure the protection of each company, we must have a signature authorizing access to your company data.

2. How long does the Employer Authorization for Third-Party Reporting (Form 1840) remain in effect?

   The authorization remains in effect until the OAG-CSD receives the revocation of authorization from either the employer or the third-party agent.

3. What if the person responsible for submitting records for a third-party agent no longer works for the third-party agent? Must I submit a new Employer Authorization for Third-Party Reporting form?
No. If the individual who works for the third-party agency leaves, there is no need to submit a new Employer Authorization for Third-Party Reporting (Form 1840.)

If a company changes third-party agents, a Revocation for Third-Party Reporting (Form 1841) must be submitted for the previous third-party agent, and a new Employer Authorization for Third-Party Reporting (Form 1840) is required.

4. Can I fax the Employer Authorization for Third-Party Reporting (Form 1840?)
No, forms are not acceptable via fax. However, forms can be emailed to the Employer Liaison for prompt processing at CSD-Employer-Liaison@texasattorneygeneral.gov or sent via mail to:

Office of the Attorney General
Employer Services
P.O. Box 12017 MC-046
Austin, TX  78711-2017

5. How do I know if the Employer Authorization for Third-Party Reporting (Form 1840) was previously submitted?

If you have reporting capabilities for your client, it is likely that Form 1840 has been received and processed. If you would like further validation, email the Employer Liaison at CSD-Employer-Liaison@texasattorneygeneral.gov.

6. What if I accidentally registered under my client’s information?

Contact the Employer Liaison at CSD-Employer-Liaison@texasattorneygeneral.gov and request that the FEIN associated with your account be changed to a different FEIN.

7. How do I remove a client from my reporting group?

1. Log into the website
2. Click on User Administration on the top menu bar
3. Click on Maintain List of Companies on the sub-menu bar
4. Click on View/Remove FEIN on the left navigation panel and follow the instructions
5. For assistance, contact the Employer Liaison through the Employer Call Center at (800) 850-6442, (option 1 for English, Option 1 for New Hire Reporting line)

8. I added my client to my reporting group but I am unable to report for the client.
Contact the Employer Liaison at CSD-Employer-Liaison@texasattorneygeneral.gov and request assistance regarding issues with adding a client to a Third-Party Agent Reporting group and reporting on his or her behalf.

Sample Forms

The following forms can be found at the end of this chapter:

- Written Authorization for Third-Party Agents
- Revocation of Authorization for Third-Party Agents
Employer Authorization for Third Party Reporting

<table>
<thead>
<tr>
<th>EMPLOYER INFORMATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employer Name:</td>
</tr>
<tr>
<td>Employer Contact:</td>
</tr>
<tr>
<td>Contact Phone:</td>
</tr>
<tr>
<td>Contact Email:</td>
</tr>
<tr>
<td>Employer FEIN:</td>
</tr>
</tbody>
</table>

The Third Party agent listed below is designated to transact all business that needs to be performed with the Office of the Attorney General, Child Support Division (OAG CSD) on the Employer's behalf. This authorization shall be in effect until a new Employer Authorization for Third Party Reporting is received from the Employer, or form 1041, Revocation of Authorization for Third Party Reporting, is submitted. The revocation may be submitted by an Employer or Third Party agent.

<table>
<thead>
<tr>
<th>THIRD PARTY INFORMATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Third Party Name:</td>
</tr>
<tr>
<td>Third Party Contact:</td>
</tr>
<tr>
<td>Third Party Contact Phone:</td>
</tr>
<tr>
<td>Third Party Contact Email:</td>
</tr>
<tr>
<td>Third Party Address:</td>
</tr>
<tr>
<td>Third Party FEIN:</td>
</tr>
</tbody>
</table>

I am an authorized agent for the Employer, and I hereby designate the above Third Party to conduct business on our behalf.

Signed by: ________________________________
Printed Name: ________________________________
Signature: ________________________________
Title: ________________________________ Date: __________________________

December 2013 Manual Form 1049
Revocation of Authorization for Third Party Reporting

This form should be used to revoke the authorization of a Third Party agent to conduct business with the Office of the Attorney General, Child Support Division. Please check the appropriate box, sign, date, and return the form to the address in the upper left corner.

☐ I am an authorized representative for the Employer, and request that the Office of the Attorney General, Child Support Division, revoke the authorization which allowed the belownamed Third Party agent to transact business on the Employer's behalf.

☐ I am an authorized representative for the Third Party agent, and request that the Office of the Attorney General, Child Support Division, revoke the authorization which allowed business to be transacted on behalf of the Employer listed below:

Employer Name: ____________________________

Employer FEIN: ____________________________

Contact Name and Phone: ____________________________

Third Party Agent Name: ____________________________

Third Party Agent FEIN: ____________________________

Contact Name and Phone: ____________________________

Printed Name __________________________________________ Signature ____________________________

Title (Owner, Partner, Officer, etc.) __________________________ Date ____________________________

January 2011 Manual Form 1841
Chapter IX: Texas Employer Website and Maintaining Company Information

General Information

The Texas Employer Website was developed as a secure method for employers to obtain information and access online applications to assist in fulfilling their child support responsibilities.

Employers assist the Office of the Attorney General’s Child Support Division (OAG-CSD) with the establishment and enforcement of child support orders. Employers’ responsibilities include:

- Reporting new hires or rehires
- Responding to Verification of Employment letters
- Enrolling dependent children in health care coverage
- Withholding payments according to Income Withholding Orders/Notices
- Remitting payments after the Order/Notice is received
- Notifying the OAG-CSD regarding lump sum payments of $500 or more
- Reporting terminated employees with Income Withholding Orders/Notices

The Texas Employer Website allows employers to:

- Obtain general information
- Stay informed of the latest information and updates
- Access the employer handbook, forms, publications and user guides
- Retrieve electronic Income Withholding Orders/Notices and National Medical Support Notices
- Access online applications to fulfill employer responsibilities
- Subscribe to email notifications

Benefits of the Texas Employer Website:

- Secure, fast and simple to use
- Reduces paper and postage costs
- Allows employers to access online applications
- Improves the quality of data submitted
- Provides capability to print and view record submission history
As a registered user, an employer can streamline processes by accessing one place to obtain all the information needed to comply with child support responsibilities.

Texas Employer Website Registration

To become a registered user on the Texas Employer Website, the requestor must have an individual email address. If the email address is being utilized by an existing registered user, the requestor will receive an error message. For security purposes, users must not share their password or user IDs with anyone in their company. Failure to comply with these rules can result in termination of access to the website applications.

When a company’s employee becomes the first registered user on the Texas Employer Website, the registered user will be prompted to either become the security contact or designate another user.

If any issues occur when registering, contact the Employer Call Center at (800) 850-6442.

Company Registration

To register a company, follow the necessary steps under Request New Account on the Employer home page. If a company’s Federal Employer Identification Number (FEIN) is not registered, the Texas Employer Website will require the following information:

- Company FEIN, Social Security number (SSN), or Individual Taxpayer Identification Number (ITIN, when the employer is a sole proprietor)
- Company legal name
- Company address
- Company phone number
- Company fax number
- User name
- User email address
- User phone number

If any issues occur with company registration, contact the Employer Call Center at (800) 850-6442.
User Registration

The first user from a company to register on the Texas Employer Website may be responsible for:

- Serving as the security contact for the company
- Registering the company information and ensuring it is accurate
- Setting up and approving additional users for the company

If any issues occur when trying to obtain a user ID or password, contact the Employer Call Center at (800) 850-6442.

 ✓ **Note:** Be aware that it can take up to two business days to receive a user ID and password if someone other than the security contact must approve the registration.

Security Contact

The security contact can be a department lead or anyone who will be responsible for maintaining user accounts and company information.

User ID

Once a registration request has been approved, a user ID and a temporary password will be sent via email. The user ID is six alpha-numeric digits and may look similar to these examples: PA1536 or EMPH1A. User IDs and passwords are not case sensitive.

If you forget your User ID, go to the Login page then click [Forgot your User ID?] and you will be taken to an email where you can provide your email address to request your User ID. If any other issues occur with a user ID, contact the Employer Call Center at (800) 850-6442.

Passwords

A temporary password will be provided to a user when the registration has been approved and must be changed immediately following initial login. The password rules will be sent to the user in the same email and should be saved for future use when attempting to reset a password.
User Guides

User guides are available to help employers navigate the Texas Employer Website. Users may obtain information about registration, user roles and security contact responsibilities.

The user guides listed below are found on the Texas Employer Website in the section entitled Employer Information Center.

- Security Contact User Guide
- New Registration User Guide

In addition, users also may access the "?” symbol located in the upper right hand corner of the Texas Employer Website screens to obtain help or additional instructions.

Maintaining Company Information

To ensure that child support-related documents are mailed in a timely manner to the correct address, employers should keep their company information up to date. The following information should always be current:

- Changes to company name
- Address information
- Phone and fax numbers
- Third-party provider information (if applicable)
- Contact names
- Changes to Federal Employer Identification Number (FEIN)

Utilizing a Third-Party Provider

The OAG’s Child Support Division maintains multiple addresses for employers to ensure that documents are sent to the correct location. Often, employers use third-party providers for payroll and/or human resource services. In addition to the primary address, employers can provide additional addresses for receiving information about:

- Wage withholding
- Verification of employment
- Worker’s compensation
- Accounts payable
- Medical benefits
Employers using a third-party agent should reference Chapter VIII for additional information.

**Manual Updates**

Employers can report changes manually by one of the following options:

- Sending a change of address form from the United States Postal Service
- Contacting the OAG Employer Call Center at (800) 850-6442 and providing the company’s old address in addition to the new address
- Mailing a letter on company letterhead to:
  
  Office of the Attorney General  
  Employer Maintenance Unit  
  P.O. Box 10  
  Austin, TX  78767-0010

**Online Updates**

Employers may access the Texas Employer Website to update company information. Through the website, an employer has the ability to review existing information and make necessary changes.

If an employer has an online account, updates can be made by going to the “Update Your Company Information” section on the Employer homepage. If an employer does not have an online account to use the Texas Employer Website, click [Request New Account] on the Employer homepage and follow the online instructions.

Surveys employers receive by mail can be completed through the Texas Employer Website without a user ID by clicking [If You Received a Survey] found on the employer homepage left navigation bar. For assistance updating company information or registering for a new account, contact the Employer Call Center at (800) 650-6442.

✔ **Note:** Updates to company information will not be reflected immediately.
Frequently Asked Questions

1. What does the error message “User Already Exists” indicate when trying to set up a new user account for a user who has never registered?

If a user who knows he or she has never registered for a user account receives the error message “User Already Exists,” it is a sign that the user is trying to use the same email address as another registered user within the same company. The Texas Employer Website is a secure website that requires all users to have a different email address. Call the Employer Call Center at (800) 850-6442 for assistance with registering.

2. How can registered users find out who the security contact is for their company?

Click the [My Account] tab on the white horizontal bar, and then click [Security Contact Information] on the blue horizontal bar. The security contact’s name and email address will be displayed.

3. What does it mean when a user requests a password reset through the website and the system notifies the user that he or she is missing security questions and answers?

The first time a user logs into his or her account, the user will be asked to complete the “Security Questions and Answer” section. The security question and answer is required to confirm that a password is being provided to the appropriate user whose data will only be accessed by that specific user.

Send an email to complete the security questions and answers or go to the “Employer Information Center” on the Texas Employer Website and select “Contact.” Scroll down to “Contact by Email” and click the first [Send email] link. Include name and user ID to request a password reset. Once you log in with your new password, go to “My Account” and provide two security questions and answers. Click [Submit] and then [Employer Home].

4. When users receive a message indicating their user ID or password is invalid or has been revoked, who should they contact?
Request a password reset by email. Include the user’s name and user ID in the email message.

5. What reporting role should a user select?

There are four reporting roles to select from, depending on what the user will be reporting for the company. The four reporting roles are:

- Security Contact – authorized to perform all online reporting functions (medical, new hire, terminations and verification of employment). In addition, the security contact manages activities associated with the company’s users.
- Payroll Reporting – authorized to report new hires, terminations and verification of employment.
- Medical Reporting – authorized to respond to National Medical Support Notices (NMSNs).
- Medical and Payroll – authorized to perform all online reporting functions (medical, new hires, terminations and verification of employment).

The New User Registration Guide found on the Texas Employer Website covers the roles in detail.

6. How can users change a reporting role?

Users must contact the company’s designated security contact to make the necessary change. If the company does not have an assigned security contact, call the Employer Call Center at (800) 850–6442 for assistance.

7. Why can’t an email address be used as a password?

Password restrictions are established to protect company data. The Office of the Attorney General takes protecting each company’s information very seriously. The advancement of technology has been a beneficial tool in providing and receiving data, but unfortunately the advancement of technology has also resulted in illegal access of personal data.

8. What has occurred when a user who is trying to submit or report a child support responsibility through the Texas Employer Website receives the message, “Your security level does not allow accessing…”?
The user may not have selected the appropriate reporting role or during the registration process the user may have omitted information. Contact the security contact or call the Employer Call Center at (800) 850–6442 for assistance.

9. Whom do users contact when they receive an email message that their company cannot be validated?

Users should contact the Employer Call Center at (800) 850–6442 for assistance.

10. Do users need a separate user ID and password for each company for which they report?

No. The security contact can attach to a user’s profile the Federal Employer Identification Number (FEIN) for which a user reports. The user will then be able to select the company’s FEIN from a drop-down list. If the company does not have a security contact, call the Employer Call Center at (800) 850–6442 for assistance.

11. What entity should a user choose on the Account Registration page?

A user **must** choose the “Employer” entity.

12. How can users change the name associated to their user ID?

Send an email message that includes the requestor’s user ID, company’s current name and the requested name change.

13. Can another staff member use the user ID and password that belongs to a registered user who is no longer with the company?

No. Each user is required to register for an account under his or her name. Allowing office employees to share a user ID and password should not be permitted as it can compromise the security of a company’s information. The OAG-CSD does not verify that a user is a current employee who should continue to have access to company information through the Texas Employer Website.
14. What should a company do when the security contact leaves?

When a security contact leaves the company, his or her account must be deleted. Other users may continue to be registered under the company FEIN, but no one will hold the user role of security contact. The next person that requests an account under that company FEIN will be required to register the company information and become the security contact or select another existing user as the security contact.

15. Can users change their user role without notifying their security contact?

Only the security contact or security liaison can change user roles. An email should be sent to request user role changes.

16. What is the time frame for website inactivity?

Users who do not log in to the Texas Employer Website for at least 23 to 24 months will receive an email that they will be deleted within 30 days from the date of the email. The email also states that users can keep the account active by logging in to the Texas Employer Website before the user account is deleted.

17. Who can employers contact if they have additional questions?

The OAG-CSD has an Employer Call Center that operates Monday through Friday from 8 a.m. to 6 p.m. Central Time. The toll-free number is (800) 850-6442. The Employer Call Center can answer questions about the Texas Employer Website. For additional questions, listen to all the options before making a selection.
Chapter X: Glossary

Administrative Fee – A fee of not more than $10 per month that an employer may deduct from an employee’s disposable earnings when performing child support withholding, and a fee of not more than $5 per month that an employer may deduct when performing spousal maintenance withholding.

Administrative Income Withholding (AIW) – A process of obtaining child or spousal support from an obligor’s income through the issuance of a legally binding withholding order/notice by a state’s IV-D agency rather than through the court system.

Arrearage – Past due, unpaid support owed by the noncustodial parent. If the parent has arrearages, she or he is said to be "in arrears."

Case – A collection of people associated with a particular child support order, court hearing, and/or request for IV-D services. This typically includes a custodial parent (CP), dependent(s) and a noncustodial parent (NCP) and/or putative father (PF). Every child support case has a unique case ID number and, in addition to names and identifying information about its members, includes information such as CP and NCP wage data, court order details and NCP payment history.

Case ID – Unique identification number assigned to a case.

Custodial Parent (CP) – A general term used to denote a person, including a non-parent, with primary custody of a child; the term is also used to refer to a child support obligee: one who has been given the exclusive right to designate the child’s primary residence and the right to receive child support.

Child or Dependent – For child support purposes, a child for whom a court may order a parent to provide child support. Under Texas law, a court may order a parent to provide child support until the later of the child’s 18th birthday or high school graduation, or beyond that if the child is not capable of self-support.

Child Support Order – A judgment, decree or order – whether temporary, final or subject to modification – issued by a court or administrative agency of a competent jurisdiction for the support and maintenance of a child. Support orders can incorporate the provision of monetary support, health care, payment of arrearages or reimbursement of costs and fees, interest and penalties, and other forms of relief.

Date of Hire – The first day services are performed for pay by an individual.
Disposable Earnings – As defined in Texas Family Code § 101.010, the portion of earnings remaining after the following deductions (and no others):
- amounts required by law to be withheld
  - federal income tax
  - FICA deductions for OASDI and Medicare hospital insurance
- union dues
- mandatory contributions toward retirement
- medical, hospitalization and disability insurance coverage for the employee and the employee’s children

Earnings – Any periodic or lump-sum payment for wages, salary, compensation received as an independent contractor, overtime pay, severance pay, commission, bonus, payments pursuant to a pension, annuity, workers’ compensation, disability and retirement program, unemployment benefits, and interest income.

Electronic Funds Transfer (EFT) – Process by which money is transmitted electronically from one bank account to another.

Employer – A person, 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 purposes of enrolling dependents in a group health insurance plan, a union, trade association, or other similar organization.

Employed – Working for wages.

Federal Employer Identification Number (FEIN) – Unique nine-digit number (xx-xxxxxxxx) assigned to all employers by the Internal Revenue Service (IRS), which must be used in numerous transactions, including submitting data and responding to requests relevant to child support.

IV-D Case – A child support case in which child support services are being provided by the state’s IV-D agency.

Medical Support – Form of child support where medical or dental insurance coverage is paid by the noncustodial parent (NCP). Depending on the court order, medical support can be an NCP’s sole financial obligation, or it can be one of several obligations, with child and/or spousal support being the others.

Multistate Employer – An organization that hires and employs people in two or more states. The multistate employer conducts business within each state and the employees are required to pay taxes in the state where they work. As with single-state employers, multistate employers are
required by law to report all new hires to the State Directory of New Hires (SDNH) that their state operates. However, unlike single-state employers, they have the option to report all of their new hires to the SDNH of only one state in which they do business, rather than to all of them.

**National Directory of New Hires (NDNH)** – A national database containing new hire (NH) and quarterly wage (QW) data from employers and unemployment insurance (UI) data from state employment security agencies (SESA). Employer data is first reported to each state’s State Directory of New Hires (SDNH) and then transmitted to the NDNH. The federal Department of Health and Human Services maintains the NDNH as part of the expanded federal parent locator service (FPLS).

**New Hire** – An employee who has not previously been employed by the employer or was previously employed by the employer but has been separated from such prior employment for at least 60 consecutive days.

**Noncustodial Parent (NCP)** – A term used to denote a parent who does not have primary custody of the child; the term is also used to refer to a child support obligor: one who has been ordered pay child support

**OAG Case Number or OAG Account Number** – A 10-digit number assigned to each Texas IV-D case that must accompany each child support payment remitted by an employer for a specific employee to ensure that the employee’s child support case is properly credited.

**Obligee** – A person or government entity entitled to receive payments of child support. Generally, this term refers to the person with primary custody of the children; also known as a custodial parent (CP).

**Obligor** – A person required to make payments under the terms of a support order of a child. The employee who is subject to income withholding is called an obligor. An obligor is often referred to as a noncustodial parent (NCP).

**Qualified Medical Child Support Order (QMCSO)** – An order, decree or judgment, including approval of a settlement agreement, issued by a court or administrative agency of competent jurisdiction that provides for medical support for a child of a participant under a group health plan or provides for health benefit coverage to such child.

**Remittance Identifier** – A remittance identifier consists of a total of 20 alpha-numeric characters. The first 10 characters will be the OAG case number followed by the first 10 characters of the court cause number truncated with no special characters.

**State Disbursement Unit (SDU)** – The single site in each state where all child support wage withholding payments are remitted.
**Tribunal** – The court, administrative agency or quasi-judicial agency authorized to establish or modify support orders or to determine parentage.
Chapter XI: Laws

New Hire Reporting

FAMILY CODE

Title 5. The Parent-Child Relationship and the Suit Affecting the Parent-Child Relationship

Subtitle D. Administrative Services

Chapter 234. State Case Registry, Disbursement Unit, and Directory of New Hires

Subchapter B. State Directory of New Hires

§ 234.101. DEFINITIONS.

In this subchapter:

(1) "Employee" means an individual who is an employee within the meaning of Chapter 24 of the Internal Revenue Code of 1986 (26 U.S.C. Section 3401(c)). The term does not include an employee of a state agency performing intelligence or counterintelligence functions if the head of the agency has determined that reporting employee information under this subchapter could endanger the safety of the employee or compromise an ongoing investigation or intelligence activity.

(2) "Employer" has the meaning given that term by Section 3401(d) of the Internal Revenue Code of 1986 (26 U.S.C. Section 3401(d)) and includes a governmental entity and a labor organization, as that term is identified in Section 2(5) of the National Labor Relations Act (29 U.S.C. Section 152(5)), including an entity, also known as a "hiring hall," used by the labor organization and an employer to carry out requirements of an agreement between the organization and an employer described in Section 8(f)(3) of that Act (29 U.S.C. Section 158(f)(3)).

(3) “Newly hired employee” means an employee who:

(A) has not been previously employed by the employer; or
(B) was previously employed by the employer but has been separated from that employment for at least 60 consecutive days.

§ 234.102. OPERATION OF NEW HIRE DIRECTORY.

In cooperation with the Texas Workforce Commission, the Title IV-D agency shall develop and operate a state directory to which employers in the state shall report each newly hired or rehired employee in accordance with the requirements of 42 U.S.C. Section 653a.

§ 234.103. CONTRACTS AND COOPERATIVE AGREEMENTS.

The Title IV-D agency may enter into cooperative agreements and contracts as necessary to create and operate the directory authorized under this subchapter.

§ 234.104. PROCEDURES.

The Title IV-D agency by rule shall establish procedures for reporting employee information and for operating a state directory of new hires meeting the requirements of federal law.

§ 234.105. CIVIL PENALTY.

(a) In addition to any other remedy provided by law, an employer who knowingly violates a procedure adopted under Section 234.104 for reporting employee information may be liable for a civil penalty as permitted by Section 453A(d) of the federal Social Security Act (42 U.S.C. Section 653a).

(b) The amount of the civil penalty may not exceed:

(1) $25 for each occurrence in which an employer fails to report an employee; or

(2) $500 for each occurrence in which the conduct described by Subdivision (1) is the result of a conspiracy between the employer and an employee to not supply a required report or to submit a false or incomplete report.

(c) The attorney general may sue to collect the civil penalty. A penalty collected under this section shall be deposited in a special fund in the state treasury.
TEXAS ADMINISTRATIVE CODE

Title 1. Administration

Part 3. Office of the Attorney General

Chapter 55. Child Support Enforcement

Subchapter I. State Directory of New Hires

§ 55.301. SCOPE

Section 453A of the Social Security Act, (42 U.S.C. § 653A), as amended by Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (PRWORA), requires each state to establish and maintain a State Directory of New Hires to provide a means for employers to assist in the state's efforts both to prevent fraud in the welfare, workers' compensation, and unemployment insurance programs, and to locate and/or collect from absent parents who owe child support by reporting information concerning newly hired and rehired employees directly to a centralized state database. This subchapter establishes within the Office of the Attorney General (Title IV-D agency) a centralized employee registry called the State Directory of New Hires and establishes procedures for employers to report employee information to the State Directory of New Hires under Chapter 234, Subchapter B of the Texas Family Code.

§ 55.302. DEFINITIONS

The following words and terms, when used in this subchapter, shall have the following meanings, unless the context clearly indicates otherwise:

(1) Common paymaster--Has the meaning as described in 26 CFR § 31.3121(s)-1.

(2) New hire--The term new hire shall have the meaning of any employee required to be reported to the State Directory of New Hires under 453A of the Social Security Act within twenty days of the employee's first day on the job.

(3) Date of hire--The date of hire for a new employee is considered to be the first day services are performed for pay by an individual.
(4) Employee--The term employee means an individual who is an employee as defined in Chapter 24 of the Internal Revenue Code (IRC) of 1986; and does not include an employee of a federal or state agency performing counter intelligence functions, if the head of such agency has determined that reporting pursuant to section 453A of the Social Security Act with respect to the employee could endanger the safety of the employee or compromise an ongoing investigation or intelligence mission. Chapter 24 of the IRC and the regulations promulgated thereunder define an “employee” as every individual performing services if the relationship between the individual and the person for whom the services are performed is the legal relationship of employer and employee (see IRC section 3401(c) and 26 CFR § 31.3401(c)-1). Generally, the legal relationship of employer and employee exists when the person for whom the services are performed has the right to control and direct the individual who performs the services not only as to the result to be accomplished, but also as to the details and means by which that result is to be accomplished.

(5) Employer--In General. The term employer has the meaning given such term in section 3401(d) of the Internal Revenue Code of 1986 and includes any governmental entity and any labor organization. At a minimum, in any case where an employer is required to give an employee a Form W-2 showing the amount of taxes withheld, the employer must meet the new hire reporting requirements. Section 3401(d) goes on to provide in part that “if the person for whom the individual performs or performed the services does not have control of the payment of the wages for such services, the term employer means the person having control of the payment of such wages.” Thus, every entity (including governmental entities and labor organizations) is an employer if the entity exercises or has the right to exercise control and direction over an individual who performs or has performed any service for the entity unless the entity does not have control of the payment of the employee's wages. In these cases, the entity having control of the payment of such wages is the “employer.” All entities satisfying 3401(d) of the IRC must meet the new hire reporting requirements set forth in section 453(b)(1) of the Social Security Act, as amended.

(6) Illegible record--A record containing indecipherable writing or print.

(7) Incomplete record--A record that does not contain all six required data elements (employee name, address, social security number and employer name, address and federal identification number).

(8) Labor organization--The term labor organization shall have the meaning given such term in section 2(5) of the National Labor Relations Act, and includes any entity (also known as Hiring Hall) which is used by the organization and an employer to carry
out requirements described in section 8(f)(3) of such Act of an agreement between the organization and the employer.

   (9) Reporting agent--Has the meaning as described in IRS Rev. Proc. 2007-38.

§ 55.303. EMPLOYER NEW HIRE REPORTING REQUIREMENTS

(a) Except as provided in §§ 55.304-55.306 of this title (relating to Common Paymaster, Multi-State Employers, and Federal Government Employers), each Texas employer shall furnish to the State Directory of New Hires in the state in which a newly hired employee works a report of all new hires that contains the following six required data elements found on the employee's W-4 form:

   (1) the employee name,
   (2) the employee address,
   (3) the employee social security number,
   (4) the employee’s date of hire,
   (5) the employer name,
   (6) the employer address, and
   (7) the Federal Employer Identification Number (FEIN).

(b) Employers, at their option may also provide the following additional information in the report:

   (1) the employee's date of birth, and
   (2) the employee's expected salary or wages,
   (3) Employer payroll address for mailing of notice to withhold child support.

(c) All employers shall report new hire information on a Form W-4 or an equivalent form by first class mail, telephonically, or electronically as determined by the employer and in a format acceptable to the Title IV-D agency. The Title IV-D agency reserves the right to decline any type of form that it deems as illegible or inappropriate for new hire report
processing and requests employers who elect to submit new hire reports via hardcopy to adopt the Employer New Hire Reporting Form supplied by the IV-D agency.

(1) Formats available to employers include:

(A) Fully and accurately completed copy of the new employee's W-4 form with all mandatory information, as specified by Employer New Hire Reporting requirements, typed or written using large, capitalized lettering (cursive writing is not permitted);

(B) Employer New Hire Reporting Form supplied by the IV-D agency:

[graphic omitted; see Texas Administrative Code for form]

(C) Existing employer report or printout;

(D) Facsimile; or

(E) Any other means authorized by the Title IV-D agency for conveying information which includes electronic transmission.

(2) All printed lists must be provided in 10 point font, or larger.

(d) To ensure timely receipt of information, Texas employers are required to report the hiring or rehiring of persons to the Title IV-D agency. Employer New Hire reports shall be considered timely if postmarked by the due date or if filed electronically, upon receipt by the agency. Employer New Hire reports are due:

(1) not later than the 20 calendar days after the date the employer hires the employee; or

(2) in the case of an employer transmitting reports electronically, by two monthly transmissions (if necessary) not more than 16 days apart.

(e) Employers should send reports for newly hired or rehired employees to Texas Employer New Hire Reporting Operations Center, Post Office Box 149224, Austin, Texas 78714-9224 Telephone Number: 1-800-850-6442 Fax Number: 1-800-732-5015.

(f) Questions regarding the Employer New Hire Reporting Program should be directed to Texas Employer New Hire Reporting on the Internet. The Internet address is: http://employer.oag.state.tx.us.
(g) Each employer submitting an incomplete or illegible report, upon request, must resubmit the incomplete or illegible data within 10 days after receiving notice.

§ 55.304. COMMON PAYMASTER

A report filed by the common paymaster or reporting agent of an employer is sufficient to meet the new hire reporting requirements for each of the related employees for which the common paymaster or payroll reporting agent provides new hire information.

§ 55.305. MULTI-STATE EMPLOYERS

(a) An employer that has employees who are employed in Texas and one or more other states may choose to report to a state other than Texas provided the employer designates only one state in which such employer has employees; transmits the required reports using electronic media authorized by the Title IV-D agency for conveying information; and notifies the Secretary of the Department of Health and Human Services, in writing, prior to reporting.

(b) When submitting written notification to the Secretary of the Department of Health and Human Services about the designation of the single State for Employer New Hire Reporting, an employer should include the following information:

(1) The same Federal Employer Identification Number (FEIN) used for the Texas Workforce Commission,

(2) Employer's name, address, telephone number related to the FEIN,

(3) State selected for reporting purposes,

(4) Other States in which the company has employees,

(5) Corporate point of contact.

(c) If the company will be reporting new hires on behalf of subsidiaries who operate under different names and FEINs, the employer should also list the names, FEINs and states where they have employees working.

(d) An employer can notify the Secretary of the Department of Health and Human Services in one of three ways:
(1) Notify the Secretary in writing at the following address: Department of Health and Human Services, Administration for Children and Families, Office of Child Support Enforcement Multi State Employer Notification, P.O. Box 509, Randallstown, MD 21133;

(2) Notify the Secretary in writing by facsimile: Department of Health and Human Services Administration for children and Families, Office of child Support Enforcement, Multistate Employer Notification, 1-410-277-9325; or

(3) Notify the Secretary via the Internet by accessing the Multistate Employer option on the OCSE Internet home Page. The Internet address is: http://www.acf.hhs.gov/programs/cse/newhire/employer/home.htm.

§ 55.306. FEDERAL GOVERNMENT EMPLOYERS

Any department, agency, or instrumentality of the United States must report directly to the National Directory of New Hires established pursuant to 42 U.S.C. 653a.

§ 55.307. CIVIL MONEY PENALTIES ON NONCOMPLYING EMPLOYERS

(a) An employer who knowingly violates any procedures found in §§ 55.301-55.308 of this title for reporting employee information may be liable for a civil penalty, which may not exceed:

(1) $25 for each occurrence in which an employer fails to report an employee; or

(2) $500 for each occurrence in which the conduct is the result of a conspiracy between the employer and employee to not supply a required report, or to submit a false or incomplete report.

(b) The Attorney General may sue to collect the civil penalty.

§ 55.308. CONFIDENTIALITY AND SECURITY

(a) Confidentiality of Records. The records contained in the new hire directory shall be confidential and may be accessed for the following purposes only:
(1) Location of Child Support Obligors. The Title IV-D Agency shall use the Employer New Hire Reporting (ENHR) information to locate individuals for purposes of establishing paternity and establishing, modifying, and enforcing child support obligations, and may disclose such information to any agent of the agency that is under contract with the agency to carry out such purposes.

(2) Verification of Eligibility for Certain Programs. A State agency responsible for administering a program specified in section 1137(b) of the Social Security Act shall have access to information reported by employers for purposes of verifying eligibility for the program.

(3) Administration of Employment Security and Workers' Compensation. State agencies operating employment security and workers' compensation programs shall have access to ENHR information reported by employers for the purposes of administering such programs.

(b) Security. The State IV-D agency shall have in effect safeguards on the integrity, accuracy and completeness of, access to, and use of data in the automated system required by 453A of the Social Security Act.

CODE OF FEDERAL REGULATIONS

Title 45—Public Welfare

Subtitle B—Regulations Relating to Public Welfare

Chapter III—Office of Child Support Enforcement (Child Support Enforcement Program), Administration for Children and Families, Department of Health and Human Services

§ 303.108. QUARTERLY WAGE AND UNEMPLOYMENT COMPENSATION CLAIMS REPORTING TO THE NATIONAL DIRECTORY OF NEW HIRES.

(a) What definitions apply to quarterly wage and unemployment compensation claims reporting? When used in this section:

(1) Reporting period means time elapsed during a calendar quarter, e.g. January-March, April-June, July-September, October-December.
(2) Wage information means:

(i) The name of the employee;

(ii) The social security number of the employee;

(iii) The aggregate wages of the employee during the reporting period; and

(iv) The name, address (and optionally, any second address for wage withholding purposes), and Federal employer identification number of an employer reporting wages.

(3) Unemployment compensation or claim information means:

(i) Whether an individual is receiving, has received or has applied for unemployment compensation;

(ii) The individual's name and current (or most recent) home address;

(iii) The individual's social security number; and

(iv) The aggregate gross amount of compensation the claimant received during the reporting quarter.

(b) What data must be transmitted to the National Directory of New Hires?

The State shall disclose quarterly, to the National Directory of New Hires, wage and claim information as defined in paragraph (a) of this section that is collected pursuant to a State's unemployment compensation program referenced in Title III of the Act or pursuant to section 1137 of the Act.

(c) What time frames apply for reporting quarterly wage and unemployment compensation claims data?

The State shall report wage information for the reporting period no later than the end of the fourth month following the reporting period. The State shall report claim information for the reporting period no later than the end of the first month following the reporting period.

(d) What reporting formats will be used for reporting data?
The State must use standardized formats established by the Secretary of Health and Human Services for reporting wage and claim information.

UNITED STATES CODE

Title 26. Internal Revenue Code

Subtitle C. Employment Taxes

Chapter 24. Collection of Income Tax at Source on Wages

§ 3401. DEFINITIONS

... (c) Employee.--For purposes of this chapter, the term “employee” includes an officer, employee, or elected official of the United States, a State, or any political subdivision thereof, or the District of Columbia, or any agency or instrumentality of any one or more of the foregoing. The term “employee” also includes an officer of a corporation.

(d) Employer.--For purposes of this chapter, the term “employer” means the person for whom an individual performs or performed any service, of whatever nature, as the employee of such person, except that–

(1) if the person for whom the individual performs or performed the services does not have control of the payment of the wages for such services, the term “employer” (except for purposes of subsection (a)) means the person having control of the payment of such wages, and

(2) in the case of a person paying wages on behalf of a nonresident alien individual, foreign partnership, or foreign corporation, not engaged in trade or business within the United States, the term “employer” (except for purposes of subsection (a)) means such person.
Verification of Employment

FAMILY CODE

Title 5. The Parent-Child Relationship and the Suit Affecting the Parent-Child Relationship

Subtitle D. Administrative Services

Chapter 231. Title IV-D Services

Subchapter D. Location of Parents and Resources

§ 231.301. TITLE IV-D PARENT LOCATOR SERVICES.

(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 or medical support or to whom a support obligation is owed; or

(2) the establishment of paternity.

(b) As authorized by federal law, the following persons may receive information under this section:

(1) a person or entity that contracts with the Title IV-D agency to provide services authorized under Title IV-D or an employee of the Title IV-D agency;

(2) an attorney who has the duty or authority, by law, to enforce an order for possession of or access to a child;

(3) a court, or an agent of the court, having jurisdiction to render or enforce an order for possession of or access to a child;

(4) the resident parent, legal guardian, attorney, or agent of a child who is not receiving public assistance; and
§ 231.302. INFORMATION TO ASSIST IN LOCATION OF PERSONS OR PROPERTY.

(a) The Title IV-D agency of this or another state may request and obtain information relating to the identity, location, employment, compensation, benefits, income, and property holdings or other assets of any person from a state or local government agency, private company, institution, or other entity as necessary to establish, modify, or enforce a support order.

(b) A government agency, private company, institution, or other entity shall provide the information requested under Subsection (a) directly to the Title IV-D agency, without the requirement of payment of a fee for the information, and shall, subject to safeguards on privacy and information security, provide the information in the most efficient and expeditious manner available, including electronic or automated transfer and interface. Any individual or entity disclosing information under this section in response to a request from a Title IV-D agency may not be held liable in any civil action or proceeding to any person for the disclosure of information under this subsection.

(c) Except as provided by Subsection (c-1), to assist in the administration of laws relating to child support enforcement under Parts A and D of Title IV of the federal Social Security Act (42 U.S.C. Sections 601-617 and 651-669):

(1) each licensing authority shall request and each applicant for a license shall provide the applicant's social security number;

(2) each agency administering a contract that provides for a payment of state funds shall request and each individual or entity bidding on a state contract shall provide the individual's or entity's social security number as required by Section 231.006, Family Code; and

(3) each agency administering a state-funded grant or loan program shall request and each applicant for a grant or loan shall provide the applicant's social security number as required by Section 231.006, Family Code.

(c-1) For purposes of issuing a license to carry a concealed handgun under Subchapter H, Chapter 411, Government Code, the Department of Public Safety is not required to request, and an applicant is not required to provide, the applicant’s social security number.
(d) This section does not limit the right of an agency or licensing authority to collect and use a social security number under another provision of law.

(e) Except as provided by Subsection (d), a social security number provided under this section is confidential and may be disclosed only for the purposes of responding to a request for information from an agency operating under the provisions of Part A or D of Title IV of the federal Social Security Act (42 U.S.C. Sections 601 et seq. and 651 et seq).

(f) Information collected by the Title IV-D agency under this section may be used only for child support purposes.

(g) In this section, "licensing authority" has the meaning assigned by Section 232.001.

§ 231.303. TITLE IV-D ADMINISTRATIVE SUBPOENA.

(a) The Title IV-D agency of this state or another state may issue an administrative subpoena to any individual or private or public entity in this state to furnish information necessary to carry out the purposes of child support enforcement under 42 U.S.C. Section 651 et seq. or this chapter.

(b) An individual or entity receiving an administrative subpoena under this section shall comply with the subpoena. The Title IV-D agency may impose a fine in an amount not to exceed $500 on an individual or entity that fails without good cause to comply with an administrative subpoena. An alleged or presumed father or a parent who fails to comply with a subpoena without good cause may also be subject to license suspension under Chapter 232.

(c) A court may compel compliance with an administrative subpoena and with any administrative fine for failure to comply with the subpoena and may award attorney's fees and costs to the Title IV-D agency in enforcing an administrative subpoena on proof that an individual or organization failed without good cause to comply with the subpoena.

(d) An individual or organization may not be liable in a civil action or proceeding for disclosing financial or other information to a Title IV-D agency under this section. The Title IV-D agency may disclose information in a financial record obtained from a financial institution only to the extent necessary:

(1) to establish, modify, or enforce a child support obligation; or
Income Withholding

FAMILY CODE

Title 1. The Marriage Relationship

Subtitle C. Dissolution of Marriage

Chapter 8. Maintenance

Subchapter C. Income Withholding

§ 8.101. INCOME WITHHOLDING; GENERAL RULE.

(a) In a proceeding in which periodic payments of spousal maintenance are ordered, modified, or enforced, the court may order that income be withheld from the disposable earnings of the obligor as provided by this chapter.

(a-1) The court may order that income be withheld from the disposable earnings of the obligor in a proceeding in which there is an agreement for periodic payments of spousal maintenance under the terms of this chapter voluntarily entered into between the parties and approved by the court.

(a-2) The court may not order that income be withheld from the disposable earnings of the obligor to the extent that any provision of an agreed order for maintenance exceeds the amount of periodic support the court could have ordered under this chapter or for any period of maintenance beyond the period of maintenance the court could have ordered under this chapter.

(b) This subchapter does not apply to contractual alimony or spousal maintenance, regardless of whether the alimony or maintenance is taxable, unless:

(1) the contract specifically permits income withholding; or

(2) the alimony or maintenance payments are not timely made under the terms of the contract.
(c) An order or writ of withholding for spousal maintenance may be combined with an order or writ of withholding for child support only if the obligee has been appointed managing conservator of the child for whom the child support is owed and is the conservator with whom the child primarily resides.

(d) An order or writ of withholding that combines withholding for spousal maintenance and child support must:

(1) require that the withheld amounts be paid to the appropriate place of payment under Section 154.004;

(2) be in the form prescribed by the Title IV-D agency under Section 158.106;

(3) clearly indicate the amounts withheld that are to be applied to current spousal maintenance and to any maintenance arrearages; and

(4) subject to the maximum withholding allowed under Section 8.106, order that withheld income be applied in the following order of priority:

(A) current child support;

(B) current spousal maintenance;

(C) child support arrearages; and

(D) spousal maintenance arrearages.

(e) Garnishment for the purposes of spousal maintenance does not apply to unemployment insurance benefit payments.

§ 8.102. WITHHOLDING FOR ARREARAGES IN ADDITION TO CURRENT SPOUSAL MAINTENANCE.

(a) The court may order that, in addition to income withheld for current spousal maintenance, income be withheld from the disposable earnings of the obligor to be applied toward the liquidation of any arrearages.

(b) The additional amount withheld to be applied toward arrearages must be whichever of the following amounts will discharge the arrearages in the least amount of time:
(1) an amount sufficient to discharge the arrearages in not more than two years; or

(2) 20 percent of the amount withheld for current maintenance.

§ 8.103. WITHHOLDING FOR ARREARAGES WHEN CURRENT MAINTENANCE IS NOT DUE.

A court may order income withholding to be applied toward arrearages in an amount sufficient to discharge those arrearages in not more than two years if current spousal maintenance is no longer owed.

§ 8.104. WITHHOLDING TO SATISFY JUDGMENT FOR ARREARAGES.

The court, in rendering a cumulative judgment for arrearages, may order that a reasonable amount of income be withheld from the disposable earnings of the obligor to be applied toward the satisfaction of the judgment.

§ 8.105. PRIORITY OF WITHHOLDING.

An order or writ of withholding under this chapter has priority over any garnishment, attachment, execution, or other order affecting disposable earnings, except for an order or writ of withholding for child support under Chapter 158.

§ 8.106. MAXIMUM AMOUNT WITHHELD FROM EARNINGS.

An order or writ of withholding must direct that an obligor's employer withhold from the obligor's disposable earnings the lesser of:

(1) the amount specified in the order or writ; or

(2) an amount that, when added to the amount of income being withheld by the employer for child support, is equal to 50 percent of the obligor's disposable earnings.
§ 8.107. ORDER OR WRIT BINDING ON EMPLOYER DOING BUSINESS IN THIS STATE.

An order or writ of withholding issued under this chapter and delivered to an employer doing business in this state is binding on the employer without regard to whether the obligor resides or works outside this state.

§ 8.108. VOLUNTARY WRIT OF WITHHOLDING BY OBLIGOR.

(a) An obligor may file with the clerk of the court a notarized or acknowledged request signed by the obligor and the obligee for the issuance and delivery to the obligor's employer of a writ of withholding. The obligor may file the request under this section regardless of whether a writ or order has been served on any party or whether the obligor owes arrearages.

(b) On receipt of a request under this section, the clerk shall issue and deliver a writ of withholding in the manner provided by this subchapter.

(c) An employer who receives a writ of withholding issued under this section may request a hearing in the same manner and according to the same terms provided by Section 8.205.

(d) An obligor whose employer receives a writ of withholding issued under this section may request a hearing in the manner provided by Section 8.258.

(e) An obligee may contest a writ of income withholding issued under this section by requesting, not later than the 180th day after the date on which the obligee discovers that the writ was issued, a hearing to be conducted in the manner provided by Section 8.258 for a hearing on a motion to stay.

(f) A writ of withholding under this section may not reduce the total amount of spousal maintenance, including arrearages, owed by the obligor.

Subchapter D. Procedure
§ 8.151. TIME LIMIT.

The court may issue an order or writ for withholding under this chapter at any time before all spousal maintenance and arrearages are paid.

§ 8.152. CONTENTS OF ORDER OF WITHHOLDING.

(a) An order of withholding must state:

(1) the style, cause number, and court having jurisdiction to enforce the order;

(2) the name, address, and, if available, the social security number of the obligor;

(3) the amount and duration of the spousal maintenance payments, including the amount and duration of withholding for arrearages, if any; and

(4) the name, address, and, if available, the social security number of the obligee.

(b) The order for withholding must require the obligor to notify the court promptly of any material change affecting the order, including a change of employer.

(c) On request by an obligee, the court may exclude from an order of withholding the obligee's address and social security number if the obligee or a member of the obligee's family or household is a victim of family violence and is the subject of a protective order to which the obligor is also subject. On granting a request under this subsection, the court shall order the clerk to:

(1) strike the address and social security number required by Subsection (a) from the order or writ of withholding; and

(2) maintain a confidential record of the obligee's address and social security number to be used only by the court.

§ 8.153. REQUEST FOR ISSUANCE OF ORDER OR WRIT OF WITHHOLDING.
An obligor or obligee may file with the clerk of the court a request for issuance of an order or writ of withholding.

§ 8.154. ISSUANCE AND DELIVERY OF ORDER OR WRIT OF WITHHOLDING.

(a) On receipt of a request for issuance of an order or writ of withholding, the clerk of the court shall deliver a certified copy of the order or writ to the obligor's current employer or to any subsequent employer of the obligor. The clerk shall attach a copy of Subchapter E to the order or writ.

(b) Not later than the fourth working day after the date the order is signed or the request is filed, whichever is later, the clerk shall issue and deliver the certified copy of the order or writ by:

   (1) certified or registered mail, return receipt requested, to the employer; or

   (2) service of citation to:

       (A) the person authorized to receive service of process for the employer in civil cases generally; or

       (B) a person designated by the employer by written notice to the clerk to receive orders or notices of income withholding.

Subchapter E. Rights and Duties of Employer

§ 8.201. ORDER OR WRIT BINDING ON EMPLOYER.

(a) An employer required to withhold income from earnings under this chapter is not entitled to notice of the proceedings before the order of withholding is rendered or writ of withholding is issued.

(b) An order or writ of withholding is binding on an employer regardless of whether the employer is specifically named in the order or writ.
§ 8.202. EFFECTIVE DATE AND DURATION OF INCOME WITHHOLDING.

An employer shall begin to withhold income in accordance with an order or writ of withholding not later than the first pay period after the date the order or writ was delivered to the employer. The employer shall continue to withhold income as required by the order or writ as long as the obligor is employed by the employer.

§ 8.203. REMITTING WITHHELD PAYMENTS.

(a) The employer shall remit to the person or office named in the order or writ of withholding the amount of income withheld from an obligor on each pay date. The remittance must include the date on which the income withholding occurred.

(b) The employer shall include with each remittance:

(1) the cause number of the suit under which income withholding is required;

(2) the payor's name; and

(3) the payee's name, unless the remittance is made by electronic funds transfer.

§ 8.204. EMPLOYER MAY DEDUCT FEE FROM EARNINGS.

An employer may deduct an administrative fee of not more than $5 each month from the obligor's disposable earnings in addition to the amount withheld as spousal maintenance.

§ 8.205. HEARING REQUESTED BY EMPLOYER.

(a) Not later than the 20th day after the date an order or writ of withholding is delivered to an employer, the employer may file with the court a motion for a hearing on the applicability of the order or writ to the employer.
(b) The hearing under this section must be held on or before the 15th day after the date the motion is made.

(c) An order or writ of withholding is binding and the employer shall continue to withhold income and remit the amount withheld pending further order of the court.

§ 8.206. LIABILITY AND OBLIGATION OF EMPLOYER FOR PAYMENTS.

(a) An employer who complies with an order or writ of withholding under this chapter is not liable to the obligor for the amount of income withheld and remitted as required by the order or writ.

(b) An employer who receives, but does not comply with, an order or writ of withholding is liable to:

(1) the obligee for any amount of spousal maintenance not paid in compliance with the order or writ;

(2) the obligor for any amount withheld from the obligor's disposable earnings, but not remitted to the obligee; and

(3) the obligee or obligor for reasonable attorney's fees and court costs incurred in recovering an amount described by Subdivision (1) or (2).

(c) An employer shall comply with an order of withholding for spousal maintenance or alimony issued in another state that appears regular on its face in the same manner as an order issued by a tribunal of this state. The employer shall notify the employee of the order and comply with the order in the manner provided by Subchapter F, Chapter 159, with respect to an order of withholding for child support issued by another state. The employer may contest the order of withholding in the manner provided by that subchapter with respect to an order of withholding for child support issued by another state.

§ 8.207. EMPLOYER RECEIVING MULTIPLE ORDERS OR WRITS.

(a) An employer who receives more than one order or writ of withholding to withhold income from the same obligor shall withhold the combined amounts due under each
order or writ unless the combined amounts due exceed the maximum total amount of allowed income withholding under Section 8.106.

(b) If the combined amounts to be withheld under multiple orders or writs for the same obligor exceed the maximum total amount of allowed income withholding under Section 8.106, the employer shall pay, until that maximum is reached, in the following order of priority:

(1) an equal amount toward current child support owed by the obligor in each order or writ until the employer has complied fully with each current child support obligation;

(2) an equal amount toward current maintenance owed by the obligor in each order or writ until the employer has complied fully with each current maintenance obligation;

(3) an equal amount toward child support arrearages owed by the obligor in each order or writ until the employer has complied fully with each order or writ for child support arrearages; and

(4) an equal amount toward maintenance arrearages owed by the obligor in each order or writ until the employer has complied fully with each order or writ for spousal maintenance arrearages.

§ 8.208. EMPLOYER'S LIABILITY FOR DISCRIMINATORY HIRING OR DISCHARGE.

(a) An employer may not use an order or writ of withholding as grounds in whole or part for the termination of employment of, or for any other disciplinary action against, an employee.

(b) An employer may not refuse to hire an employee because of an order or writ of withholding.

(c) An employer who intentionally discharges an employee in violation of this section is liable to that employee for current wages, other employment benefits, and reasonable attorney's fees and court costs incurred in enforcing the employee's rights.
(d) In addition to liability imposed under Subsection (c), the court shall order with respect to an employee whose employment was suspended or terminated in violation of this section appropriate injunctive relief, including reinstatement of:

(1) the employee's position with the employer; and

(2) fringe benefits or seniority lost as a result of the suspension or termination.

(e) An employee may bring an action to enforce the employee's rights under this section.

§ 8.209. PENALTY FOR NONCOMPLIANCE.

(a) In addition to the civil remedies provided by this subchapter or any other remedy provided by law, an employer who knowingly violates this chapter by failing to withhold income for spousal maintenance or to remit withheld income in accordance with an order or writ of withholding issued under this chapter commits an offense.

(b) An offense under this section is punishable by a fine not to exceed $200 for each violation.

§ 8.210. NOTICE OF TERMINATION OF EMPLOYMENT AND OF NEW EMPLOYMENT.

(a) An obligor who terminates employment with an employer who has been withholding income and the obligor's employer shall each notify the court and the obligee of:

(1) the termination of employment not later than the seventh day after the date of termination;

(2) the obligor's last known address; and

(3) the name and address of the obligor's new employer, if known.

(b) The obligor shall inform a subsequent employer of the order or writ of withholding after obtaining employment.
Title 5. The Parent-Child Relationship and the Suit Affecting the Parent-Child Relationship

Subtitle A. General Provisions

Chapter 101. Definitions

§ 101.010. DISPOSABLE EARNINGS.

"Disposable earnings" means the part of the earnings of an individual remaining after the deduction from those earnings of any amount required by law to be withheld, union dues, nondiscretionary retirement contributions, and medical, hospitalization, and disability insurance coverage for the obligor and the obligor's children.

§ 101.011. EARNINGS.

"Earnings" means a payment to or due an individual, regardless of source and how denominated. The term includes a periodic or lump-sum payment for:

(1) wages, salary, compensation received as an independent contractor, overtime pay, severance pay, commission, bonus, and interest income;

(2) payments made under a pension, an annuity, workers' compensation, and a disability or retirement program; and

(3) unemployment benefits.

§ 101.012. EMPLOYER.

"Employer" means a person, 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 insurance plan, a union, trade association, or other similar organization.
Title 5.  The Parent-Child Relationship and the Suit Affecting the Parent-Child Relationship

Subtitle B.  Suits Affecting the Parent-Child Relationship

Chapter 158.  Withholding from Earnings for Child Support

Subchapter A.  Income Withholding Required;  General Provisions

§ 158.001.  INCOME WITHHOLDING;  GENERAL RULE.

In a proceeding in which periodic payments of child support are ordered, modified, or enforced, the court or the Title IV-D agency shall order that income be withheld from the disposable earnings of the obligor as provided by this chapter.

§ 158.002.  SUSPENSION OF INCOME WITHHOLDING.

Except in a Title IV-D case, the court may provide, for good cause shown or on agreement of the parties, that the order withholding income need not be issued or delivered to an employer until:

(1) the obligor has been in arrears for an amount due for more than 30 days;

(2) the amount of the arrearages is an amount equal to or greater than the amount due for a one-month period; or

(3) any other violation of the child support order has occurred.

§ 158.003.  WITHHOLDING FOR ARREARAGES IN ADDITION TO CURRENT SUPPORT.

(a) In addition to income withheld for the current support of a child, income shall be withheld from the disposable earnings of the obligor to be applied toward the liquidation of any child support arrearages, including accrued interest as provided in Chapter 157.
(b) The additional amount to be withheld for arrearages shall be an amount sufficient to discharge those arrearages in not more than two years or an additional 20 percent added to the amount of the current monthly support order, whichever amount will result in the arrearages being discharged in the least amount of time.

§ 158.004. WITHHOLDING FOR ARREARAGES WHEN NO CURRENT SUPPORT IS DUE.

If current support is no longer owed, the court or the Title IV-D agency shall order that income be withheld for arrearages, including accrued interest as provided in Chapter 157, in an amount sufficient to discharge those arrearages in not more than two years.

§ 158.005. WITHHOLDING TO SATISFY JUDGMENT FOR ARREARAGES.

In rendering a cumulative judgment for arrearages, the court shall order that a reasonable amount of income be withheld from the disposable earnings of the obligor to be applied toward the satisfaction of the judgment.

§ 158.0051. ORDER FOR WITHHOLDING FOR COSTS AND FEES.

(a) In addition to an order for income to be withheld for child support, including child support and child support arrearages, the court may render an order that income be withheld from the disposable earnings of the obligor to be applied towards the satisfaction of any ordered attorney's fees and costs resulting from an action to enforce child support under this title.

(b) An order rendered under this section is subordinate to an order or writ of withholding for child support under this chapter and is subject to the maximum amount allowed to be withheld under Section 158.009.

(c) The court shall order that amounts withheld for fees and costs under this section be remitted directly to the person entitled to the ordered attorney's fees or costs or be paid through a local registry for disbursement to that person.
§ 158.006. INCOME WITHHOLDING IN TITLE IV-D SUITS.

In a Title IV-D case, the court or the Title IV-D agency shall order that income be withheld from the disposable earnings of the obligor and may not suspend, stay, or delay issuance of the order or of a judicial or administrative writ of withholding.

§ 158.007. EXTENSION OF REPAYMENT SCHEDULE BY COURT OR TITLE IV-D AGENCY; UNREASONABLE HARDSHIP.

If the court or the Title IV-D agency finds that the schedule for discharging arrearages would cause the obligor, the obligor's family, or children for whom support is due from the obligor to suffer unreasonable hardship, the court or agency may extend the payment period for a reasonable length of time.

§ 158.008. PRIORITY OF WITHHOLDING.

An order or writ of withholding has priority over any garnishment, attachment, execution, or other assignment or order affecting disposable earnings.

§ 158.009. MAXIMUM AMOUNT WITHHELD FROM EARNINGS.

An order or writ of withholding shall direct that any employer of the obligor withhold from the obligor's disposable earnings the amount specified up to a maximum amount of 50 percent of the obligor's disposable earnings.

§ 158.010. ORDER OR WRIT BINDING ON EMPLOYER DOING BUSINESS IN STATE.

An order or writ of withholding issued under this chapter and delivered to an employer doing business in this state is binding on the employer without regard to whether the obligor resides or works outside this state.

§ 158.011. VOLUNTARY WITHHOLDING BY OBLIGOR.
(a) An obligor may file with the clerk of the court a notarized or acknowledged request signed by the obligor and the obligee for the issuance and delivery to the obligor's employer of a writ of withholding. A notarized or acknowledged request may be filed under this section regardless of whether a writ or order has been served on any party or of the existence or amount of an arrearage.

(b) On receipt of a request under this section, the clerk shall issue and deliver a writ of withholding in the manner provided by this chapter.

(c) An employer that receives a writ of withholding issued under this section may request a hearing in the same manner and according to the same terms provided by Section 158.205.

(d) An obligor whose employer receives a writ of withholding issued under this section may request a hearing in the manner provided by Section 158.309.

(e) An obligee may contest a writ of withholding issued under this section by requesting, not later than the 180th day after the date on which the obligee discovers that the writ has been issued, a hearing in the manner provided by Section 158.309.

(f) A writ of withholding under this section may not reduce the total amount of child support, including arrearages, owed by the obligor.

Subchapter B. Procedure

§ 158.101. APPLICABILITY OF PROCEDURE.

Except as otherwise provided in this chapter, the procedure for a motion for enforcement of child support as provided in Chapter 157 applies to an action for income withholding.

§ 158.102. TIME LIMITATIONS.
An order or writ for income withholding under this chapter may be issued until all current support and child support arrearages, interest, and any applicable fees and costs, including ordered attorney's fees and court costs, have been paid.

§ 158.103. CONTENTS OF ORDER OR WRIT OF WITHHOLDING.

An order of withholding or writ of withholding issued under this chapter must contain the information required by the forms prescribed by the Title IV-D agency under Section 158.106.

§ 158.104. REQUEST FOR ISSUANCE OF ORDER OR JUDICIAL WRIT OF WITHHOLDING.

A request for issuance of an order or judicial writ of withholding may be filed with the clerk of the court by the prosecuting attorney, the Title IV-D agency, the friend of the court, a domestic relations office, the obligor, the obligee, or an attorney representing the obligee or obligor.

§ 158.105. ISSUANCE AND DELIVERY OF ORDER OR JUDICIAL WRIT OF WITHHOLDING.

(a) On filing a request for issuance of an order or judicial writ of withholding, the clerk of the court shall cause a certified copy of the order or writ to be delivered to the obligor's current employer or to any subsequent employer of the obligor.

(b) The clerk shall issue and deliver the certified copy of the order or judicial writ not later than the fourth working day after the date the order is signed or the request is filed, whichever is later.

(c) An order or judicial writ of withholding shall be delivered to the employer by first class mail or, if requested, by certified or registered mail, return receipt requested, by electronic transmission, including electronic mail or facsimile transmission, or by service of citation to:
(1) the person authorized to receive service of process for the employer in

civil cases generally; or

(2) a person designated by the employer, by written notice to the clerk, to
receive orders or writs of withholding.

(d) The clerk may deliver an order or judicial writ of withholding under
Subsection (c) by electronic mail if the employer has an electronic mail address or by facsimile
transmission if the employer is capable of receiving documents transmitted in that manner. If
delivery is accomplished by electronic mail, the clerk must request acknowledgment of receipt
from the employer or use an electronic mail system with a read receipt capability. If delivery is
accomplished by facsimile transmission, the clerk's facsimile machine must create a delivery
confirmation report.

§ 158.106. FORMS FOR INCOME WITHHOLDING.

(a) The Title IV-D agency shall prescribe forms as required by federal law in a
standard format entitled order or notice to withhold income for child support under this chapter.

(b) The Title IV-D agency shall make the required forms available to obligors,
obligees, domestic relations offices, friends of the court, clerks of the court, and private
attorneys.

(c) The Title IV-D agency may prescribe additional forms for the efficient
collection of child support from earnings and to promote the administration of justice for all
parties.

(d) The forms prescribed by the Title IV-D agency under this section shall be
used:

(1) for an order or judicial writ of income withholding under this chapter; and

(2) to request voluntary withholding under Section 158.011.

Subchapter C. Rights and Duties of Employer
§ 158.201. ORDER OR WRIT BINDING ON EMPLOYER.
(a) An employer required to withhold income from earnings is not entitled to notice of the proceedings before the order is rendered or writ of withholding is issued.
(b) An order or writ of withholding is binding on an employer regardless of whether the employer is specifically named in the order or writ.

§ 158.202. EFFECTIVE DATE OF AND DURATION OF WITHHOLDING.
An employer shall begin to withhold income in accordance with an order or writ of withholding not later than the first pay period following the date on which the order or writ was delivered to the employer and shall continue to withhold income as required by the order or writ as long as the obligor is employed by the employer.

§ 158.203. REMITTING WITHHELD PAYMENTS.
(a) The employer shall remit the amount to be withheld to the person or office named in the order or writ on each pay date. The payment must include the date on which the withholding occurred.
(b) An employer with 50 or more employees shall remit a payment required under this section by electronic funds transfer or electronic data interchange not later than the second business day after the pay date.
(b-1) An employer with fewer than 50 employees may remit a payment required under this section by electronic funds transfer or electronic data interchange. A payment remitted by the employer electronically must be remitted not later than the date specified by Subsection (b).
(c) The employer shall include with each payment transmitted:
(1) the number assigned by the Title IV-D agency, if available, and the county identification number, if available;
(2) the name of the county or the county's federal information processing standard code;
(3) the cause number of the suit under which withholding is required;

(4) the payor's name and social security number; and

(5) the payee's name and, if available, social security number, unless the payment is transmitted by electronic funds transfer.

(d) In a case in which an obligor's income is subject to withholding, the employer shall remit the payment of child support directly to a local registry, the Title IV-D agency, or to the state disbursement unit.

(e) the state disbursement unit may impose on an employer described by Subsection (b) a payment processing surcharge in an amount of not more than $25 for each remittance made on behalf of an employee that is not made by electronic funds transfer or electronic data exchange. The payment processing surcharge under this subsection may not be charged against the employee or taken from amounts withheld from the employee’s wages.

(f) the state disbursement unit shall:

(1) notify an employer described by Subsection (b) who fails to remit withheld income by electronic funds transfer or electronic data exchange that the employer is subject to a payment processing surcharge under Subsection (e); and

(2) inform the employer of the amount of the surcharge owed and the manner in which the surcharge is required to be paid to the unit.

§ 158.204. EMPLOYER MAY DEDUCT FEE FROM EARNINGS.

An employer may deduct an administrative fee of not more than $10 each month from the obligor's disposable earnings in addition to the amount to be withheld as child support.

§ 158.205. HEARING REQUESTED BY EMPLOYER.

(a) Not later than the 20th day after the date an order or writ of withholding is delivered, the employer may, as appropriate, file a motion with the court or file a request with the Title IV-D agency for a hearing on the applicability of the order or writ to the employer. The Title IV-D agency by rule shall establish procedures for an agency hearing under this section.
(b) The hearing under this section shall be held not later than the 15th day after the date the motion or request was made.

(c) An order or writ of withholding remains binding and payments shall continue to be made pending further order of the court or, in the case of an administrative writ, action of the Title IV-D agency.

§ 158.206. LIABILITY AND OBLIGATION OF EMPLOYER; WORKERS' COMPENSATION CLAIMS.

(a) An employer receiving an order or a writ of withholding under this chapter, including an order or writ directing that health 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 is required to pay for health insurance under Chapter 154;

(2) to the obligor for:

(A) the amount withheld and not paid as required by the order or writ; and

(B) an amount equal to the interest that accrues under Section 157.265 on the amount withheld and not paid; and

(3) for reasonable attorney's fees and court costs.

(c) If an obligor has filed a claim for workers' compensation, the obligor's employer shall send a copy of the income withholding order or writ to the insurance carrier with whom the claim has been filed in order to continue the ordered withholding of income.

§ 158.207. EMPLOYER RECEIVING MORE THAN ONE ORDER OR WRIT.
(a) An employer receiving two or more orders or writs for one obligor shall comply with each order or writ to the extent possible.

(b) If the total amount due under the orders or writs exceeds the maximum amount allowed to be withheld under Section 158.009, the employer shall pay an equal amount towards the current support in each order or writ until the employer has complied fully with each current support obligation and, thereafter, equal amounts on the arrearages until the employer has complied with each order or writ, or until the maximum total amount of allowed withholding is reached, whichever occurs first.

(c) An employer who receives more than one order or writ of withholding that combines withholding for child support and spousal maintenance as provided by Section 8.101 shall withhold income and pay the amount withheld in accordance with Section 8.207.

§ 158.208. EMPLOYER MAY COMBINE AMOUNTS WITHHELD.

An employer required to withhold from more than one obligor may combine the amounts withheld and make a single payment to each agency designated if the employer separately identifies the amount of the payment that is attributable to each obligor.

§ 158.209. EMPLOYER'S PENALTY FOR DISCRIMINATORY HIRING OR DISCHARGE.

(a) An employer may not use an order or writ of withholding as grounds in whole or part for the termination of employment or for any other disciplinary action against an employee.

(b) An employer may not refuse to hire an employee because of an order or writ of withholding.

(c) If an employer intentionally discharges an employee in violation of this section, the employer continues to be liable to the employee for current wages and other benefits and for reasonable attorney's fees and court costs incurred in enforcing the employee's rights as provided in this section.
(d) An action under this section may be brought by the employee, a friend of the court, the domestic relations office, or the Title IV-D agency.

§ 158.210. FINE FOR NONCOMPLIANCE.

(a) In addition to the civil remedies provided by this subchapter or any other remedy provided by law, an employer who knowingly violates the provisions of this chapter may be subject to a fine not to exceed $200 for each occurrence in which the employer fails to:

(1) withhold income for child support as instructed in an order or writ issued under this chapter; or

(2) remit withheld income within the time required by Section 158.203 to the payee identified in the order or writ or to the state disbursement unit.

(b) A fine recovered under this section shall be paid to the county in which the obligee resides and shall be used by the county to improve child support services.

§ 158.211. NOTICE OF TERMINATION OF EMPLOYMENT AND OF NEW EMPLOYMENT.

(a) If an obligor terminates employment with an employer who has been withholding income, both the obligor and the employer shall notify the court or the Title IV-D agency and the obligee of that fact not later than the seventh day after the date employment terminated and shall provide the obligor's last known address and the name and address of the obligor's new employer, if known.

(b) The obligor has a continuing duty to inform any subsequent employer of the order or writ of withholding after obtaining employment.

§ 158.212. IMPROPER PAYMENT.

An employer who remits a payment to an incorrect office or person shall remit the payment to the agency or person identified in the order of withholding not later than the second business day after the date the employer receives the returned payment.
§ 158.213. WITHHOLDING FROM WORKERS' COMPENSATION BENEFITS.

(a) An insurance carrier that receives an order or writ of withholding under Section 158.206 for workers' compensation benefits payable to an obligor shall withhold an amount not to exceed the maximum amount allowed to be withheld from income under Section 158.009 regardless of whether the benefits payable to the obligor for lost income are paid as lump sum amounts or as periodic payments.

(b) An insurance carrier subject to this section shall send the amount withheld for child support to the place of payment designated in the order or writ of withholding.

§ 158.214. WITHHOLDING FROM SEVERANCE PAY

(a) In this section, "severance pay" means income paid on termination of employment in addition to the employee's usual earnings from the employer at the time of termination.

(b) An employer receiving an order or writ of withholding under this chapter shall withhold from any severance pay owed an obligor an amount equal to the amount the employer would have withheld under the order or writ if the severance pay had been paid as the obligor's usual earnings as a current employee.

(c) The total amount that may be withheld under this section is subject to the maximum amount allowed to be withheld under Section 158.009.

§ 158.215. WITHHOLDING FROM LUMP-SUM PAYMENTS.

(a) In this section, "lump-sum payment" means income in the form of a bonus or an amount paid in lieu of vacation or other leave time. The term does not include an employee's usual earnings or an amount paid as severance pay on termination of employment.

(b) This section applies only to an employer who receives an administrative writ of withholding in a Title IV-D case.

(c) An employer to whom this section applies may not make a lump-sum payment to the obligor in the amount of $500 or more without first notifying the Title IV-D agency to
determine whether all or a portion of the payment should be applied to child support arrearages owed by the obligor.

(d) After notifying the Title IV-D agency in compliance with Subsection (c), the employer may not make the lump-sum payment before the earlier of:

(1) the 10th day after the date on which the employer notified the Title IV-D agency; or
(2) the date on which the employer receives authorization from the Title IV-D agency to make the payment.

(e) If the employer receives a timely authorization from the Title IV-D agency under Subsection (d)(2), the employer may make the payment only in accordance with the terms of that authorization.

Subchapter D. Judicial Writ of Withholding Issued by Clerk

§ 158.301. NOTICE OF APPLICATION FOR JUDICIAL WRIT OF WITHHOLDING; FILING.

(a) A notice of application for judicial writ of withholding may be filed if:

(1) a delinquency occurs in child support payments in an amount equal to or greater than the total support due for one month; or
(2) income withholding was not ordered at the time child support was ordered.

(b) The notice of application for judicial writ of withholding may be filed in the court of continuing jurisdiction by:

(1) the Title IV-D agency;
(2) the attorney representing the local domestic relations office;
(3) the attorney appointed a friend of the court as provided in Chapter 202;
(4) the obligor or obligee; or

(5) a private attorney representing the obligor or obligee.

(c) The Title IV-D agency may in a Title IV-D case file a notice of application for judicial writ of withholding on request of the obligor or obligee.

§ 158.302. CONTENTS OF NOTICE OF APPLICATION FOR JUDICIAL WRIT OF WITHHOLDING.

The notice of application for judicial writ of withholding shall be verified and:

(1) state the amount of monthly support due, including medical 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;

(3) state that if the obligor does not contest the 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 the issuance and delivery of a writ of withholding;

(5) state that if the obligor contests the 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;

(6) state that the sole ground for successfully 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.

§ 158.303. INTERSTATE REQUEST FOR INCOME WITHHOLDING.

(a) The registration of a foreign support order as provided in Chapter 159 is sufficient for the filing of a notice of application for judicial writ of withholding.

(b) The notice shall be filed with the clerk of the court having venue as provided in Chapter 159.

(c) Notice of application for judicial writ of withholding may be delivered to the obligor at the same time that an order is filed for registration under Chapter 159.

§ 158.304. ADDITIONAL ARREARAGES.

If the notice of application for judicial writ of withholding states that the obligor has repeatedly failed to pay support in accordance with the underlying support order, the judicial writ may include arrearages that accrue between the filing of the notice and the date of the hearing or the issuance of a judicial writ of withholding.

§ 158.306. DELIVERY OF NOTICE OF APPLICATION FOR JUDICIAL WRIT OF WITHHOLDING; TIME OF DELIVERY.

(a) A notice of application for judicial writ of withholding may be delivered to the obligor by:

(1) hand delivery by a person designated by the Title IV-D agency or local domestic relations office;

(2) first-class or certified mail, return receipt requested, addressed to the obligor's last known address or place of employment; or

(3) by service of citation as in civil cases generally.
(b) If the notice is delivered by mailing or hand delivery, the party who filed the notice shall file with the court a certificate stating the name, address, and date on which the mailing or hand delivery was made.

(c) Notice is considered to have been received by the obligor:

(1) if hand delivered, on the date of delivery;
(2) if mailed by certified mail, on the date of receipt;
(3) if mailed by first-class mail, on the 10th day after the date the notice was mailed; or
(4) if delivered by service of citation, on the date of service.

§ 158.307. MOTION TO STAY ISSUANCE OF WRIT OF WITHHOLDING.

(a) The obligor may stay issuance of a judicial writ of withholding by filing a motion to stay with the clerk of court not later than the 10th day after the date the notice of application for judicial writ of withholding was received.

(b) The grounds for filing a motion to stay issuance are limited to a dispute concerning the identity of the obligor or the existence or the amount of the arrearages.

(c) The obligor shall verify that statements of fact in the motion to stay issuance of the writ are true and correct.

§ 158.308. EFFECT OF FILING MOTION TO STAY.

The filing of a motion to stay by an obligor in the manner provided by Section 158.307 prohibits the clerk of court from delivering the judicial writ of withholding to any employer of the obligor before a hearing is held.

§ 158.309. HEARING ON MOTION TO STAY.

(a) If a motion to stay is filed in the manner provided by Section 158.307, the court shall set a hearing on the motion and the clerk of court shall notify the obligor, obligee, or
their authorized representatives, and the party who filed the application for judicial writ of withholding of the date, time, and place of the hearing.

(b) The court shall hold a hearing on the motion to stay not later than the 30th day after the date the motion was filed, except that a hearing may be held later than the 30th day after filing if both the obligor and obligee agree and waive the right to have the motion heard within 30 days.

(c) 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 and interest; or

(2) grant the motion to stay.

§ 158.310. SPECIAL EXCEPTIONS.

(a) A defect in a notice of application for judicial writ of withholding is waived unless the respondent specially excepts in writing and cites with particularity the alleged defect, obscurity, or other ambiguity in the notice.

(b) A special exception under this section must be heard by the court before hearing the motion to stay issuance.

(c) If the court sustains an exception, the court shall provide the party filing the notice an opportunity to refile and the court shall continue the hearing to a date certain without the requirement of additional service.

§ 158.311. ARREARAGES.

(a) Payment of arrearages after receipt of notice of application for judicial writ of withholding may not be the sole basis for the court to refuse to order withholding.

(b) The court shall order that a reasonable amount of income be withheld to be applied toward the liquidation of arrearages, even though a judgment confirming arrearages has been rendered against the obligor.
§ 158.312. REQUEST FOR ISSUANCE AND DELIVERY OF WRIT OF WITHHOLDING.

(a) If a notice of application for judicial writ of 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, the amount of arrearages, and the amount to be withheld from the obligor's income.

(b) The request for issuance may not be filed before the 11th day after the date of receipt of the notice of application for judicial writ of withholding by the obligor.

§ 158.313. ISSUANCE AND DELIVERY OF WRIT OF WITHHOLDING.

(a) On the filing of a request for issuance of a writ of withholding, the clerk of the court shall issue the writ.

(b) The writ shall be delivered as provided by Subchapter B.

(c) The clerk shall issue and mail the writ not later than the second working day after the date the request is filed.

§ 158.314. CONTENTS OF WRIT OF WITHHOLDING.

The 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, and child support arrearages an amount that is consistent with the provisions of this chapter regarding orders of withholding.

§ 158.315. EXTENSION OF REPAYMENT SCHEDULE BY PARTY; UNREASONABLE HARDSHIP.

If the party who filed the notice of application for judicial writ of withholding finds that the schedule for repaying arrearages would cause the obligor, the obligor's family, or
the children for whom the support is due from the obligor to suffer unreasonable hardship, the party may extend the payment period in the writ.

§ 158.316. PAYMENT OF AMOUNT TO BE WITHHELD.

The amount to be withheld shall be paid to the person or office named in the writ on each pay date and shall include with the payment the date on which the withholding occurred.

§ 158.317. FAILURE TO RECEIVE NOTICE OF APPLICATION FOR JUDICIAL WRIT OF WITHHOLDING.

(a) Not later than the 30th day after the date of the first pay period following the date of delivery of the writ of withholding to the obligor's employer, the obligor may file an affidavit with the court that a motion to stay was not timely filed because the notice of application for judicial writ of withholding was not received by the obligor and that grounds exist for a motion to stay.

(b) Concurrently with the filing of the affidavit, the obligor may file a motion to withdraw the writ of withholding and request a hearing on the applicability of the writ.

(c) Income withholding may not be interrupted until after the hearing at which the court renders an order denying or modifying withholding.

§ 158.319. ISSUANCE AND DELIVERY OF JUDICIAL WRIT OF WITHHOLDING TO SUBSEQUENT EMPLOYER.

(a) After the issuance of a judicial writ of withholding by the clerk, a party authorized to file a notice of application for judicial writ of withholding under this subchapter may issue the judicial writ of withholding to a subsequent employer of the obligor by delivering to the employer by certified mail a copy of the writ.

(b) The judicial writ of withholding must include the name, address, and signature of the party and clearly indicate that the writ is being issued to a subsequent employer.
Subchapter E. Modification, Reduction, or Termination of Withholding

§ 158.401. MODIFICATIONS TO OR TERMINATION OF WITHHOLDING BY TITLE IV-D AGENCY.

(a) The Title IV-D agency shall establish procedures for the reduction in the amount of or termination of withholding from income on the liquidation of an arrearages or the termination of the obligation of support in Title IV-D cases. The procedures shall provide that the payment of overdue support may not be used as the sole basis for terminating withholding.

(b) At the request of the Title IV-D agency, the clerk of the court shall issue a judicial writ of withholding to the obligor's employer reflecting any modification or changes in the amount to be withheld or the termination of withholding.

§ 158.402. AGREEMENT BY PARTIES REGARDING AMOUNT OR DURATION OF WITHHOLDING.

(a) An obligor and obligee may agree on a reduction in or termination of income withholding for child support on the occurrence of one of the following contingencies stated in the order:

(1) the child becomes 18 years of age or is graduated from high school, whichever is later;

(2) the child's disabilities of minority are removed by marriage, court order, or other operation of law; or

(3) the child dies.
(b) The obligor and obligee may file a notarized or acknowledged request with the clerk of the court under Section 158.011 for a revised judicial writ of withholding, including the termination of withholding.

(c) The clerk shall issue and deliver to an employer of the obligor a judicial writ of withholding that reflects the agreed revision or termination of withholding.

(d) An agreement by the parties under this section does not modify the terms of a support order.

§ 158.403. MODIFICATIONS TO OR TERMINATION OF WITHHOLDING IN VOLUNTARY WITHHOLDING CASES.

(a) If an obligor initiates voluntary withholding under Section 158.011, the obligee or an agency providing child support services may file with the clerk of the court a notarized request signed by the obligor and the obligee or agency, as appropriate, for the issuance and delivery to the obligor of a:

(1) modified writ of withholding that reduces the amount of withholding; or

(2) notice of termination of withholding.

(b) On receipt of a request under this section, the clerk shall issue and deliver a modified writ of withholding or notice of termination in the manner provided by Section 158.402.

(c) The clerk may charge a reasonable fee not to exceed $15 for filing the request.

(d) An obligee may contest a modified writ of withholding or notice of termination issued under this section by requesting a hearing in the manner provided by Section 158.309 not later than the 180th day after the date the obligee discovers that the writ or notice has been issued.

§ 158.404. DELIVERY OF ORDER OF REDUCTION OR TERMINATION OF WITHHOLDING.
If a court has rendered an order that reduces the amount of child support to be withheld or terminates withholding for child support, any person or governmental entity may deliver to the employer a certified copy of the order without the requirement that the clerk of the court deliver the order.

§ 158.405. LIABILITY OF EMPLOYERS.

The provisions of this chapter regarding the liability of employers for withholding apply to an order that reduces or terminates withholding.

Subchapter F. Administrative Writ of Withholding in Title Iv-d Cases

§ 158.501. ISSUANCE OF ADMINISTRATIVE WRIT OF WITHHOLDING.

(a) The Title IV-D agency may initiate income withholding by issuing an administrative writ of withholding for the enforcement of an existing order as authorized by this subchapter.

(b) Except as provided by Subsection (d), the Title IV-D agency is the only entity that may issue an administrative writ under this subchapter.

(c) The Title IV-D agency may use the procedures authorized by this subchapter to enforce a support order rendered by a tribunal of another state regardless of whether the order has been registered under Chapter 159.

(d) A domestic relations office may issue an administrative writ of withholding under this chapter in a proceeding in which the office is providing child support enforcement services. A reference in this code to the Title IV-D agency that relates to an administrative writ includes a domestic relations office, except that the writ must be in the form prescribed by the Title IV-D agency under Section 158.504.

§ 158.502. WHEN ADMINISTRATIVE WRIT OF WITHHOLDING MAY BE ISSUED.
(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, and child support arrearages, and Title IV-D service fees authorized under Section 231.103 for which the obligor is responsible, have been paid. The writ issued under this subsection may be based on an obligation in more than one support order.

(b) The Title IV-D agency may issue an administrative writ of withholding that directs that an amount be withheld for an arrearage or adjusts the amount to be withheld for an arrearage. An administrative writ issued under this subsection may be contested as provided by Section 158.506.

(c) The Title IV-D agency may issue an administrative writ of withholding as a reissuance of an existing withholding order on file with the court of continuing jurisdiction or a tribunal of another state. The administrative writ under this subsection is not subject to the contest provisions of Sections 158.505(a)(2) and 158.506.

(d) The Title IV-D agency may issue an administrative writ of withholding to direct child support payments to the state disbursement unit of another state.

§ 158.503. DELIVERY OF ADMINISTRATIVE WRIT TO EMPLOYER; FILING WITH COURT OR MAINTAINING RECORD.

(a) An administrative writ of withholding issued under this subchapter may be delivered to an employer by mail or by electronic transmission.

(b) The Title IV-D agency shall:

(1) not later than the third business day after the date of delivery of the administrative writ of withholding to an employer, file a copy of the writ, together with a signed certificate of service, in the court of continuing jurisdiction; or

(2) maintain a record of the writ until all support obligations of the obligor have been satisfied or income withholding has been terminated as provided by this chapter.

(b-1) The certificate of service required under Subsection (b)(1) may be signed electronically.
(c) The copy of the administrative writ of withholding filed with the clerk of court must include:

(1) the name, address, and signature of the authorized attorney or individual that issued the writ;

(2) the name and address of the employer served with the writ; and

(3) a true copy of the information provided to the employer.

(d) The clerk of the court may charge a reasonable fee not to exceed $15 for filing an administrative writ under this section.

§ 158.504. CONTENTS OF ADMINISTRATIVE WRIT OF WITHHOLDING.

(a) The administrative writ of withholding must be in the form prescribed by the Title IV-D agency as required by this chapter and in a standard format authorized by the United States Department of Health and Human Services.

(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 shall specify the place where the withheld income is to be paid.

§ 158.505. NOTICE TO OBLIGOR.

(a) On issuance of an administrative writ of withholding, the Title IV-D agency shall send the obligor:

(1) notice that the withholding has commenced, including, if the writ is issued as provided by Section 158.502(b), the amount of the arrearages, including accrued interest;

(2) except as provided by Section 158.502(c), notice of the procedures to follow if the obligor desires to contest withholding on the grounds that the identity of the obligor or the existence or amount of arrearages is incorrect; and

(3) a copy of the administrative writ, including the information concerning income withholding provided to the employer.
(b) The notice required under this section may be sent to the obligor by:

(1) personal delivery by a person designated by the Title IV-D agency;

(2) first-class mail or certified mail, return receipt requested, addressed to the obligor's last known address; or

(3) service of citation as in civil cases generally.

(c) Repealed by Acts 1999, 76th Leg., ch. 556, Sec. 81, eff. Sept. 1, 1999.

§ 158.506. CONTEST BY OBLIGOR TO ADMINISTRATIVE WRIT OF WITHHOLDING.

(a) Except as provided by Section 158.502(c), an obligor receiving the notice under Section 158.505 may request a review by the Title IV-D agency to resolve any issue in dispute regarding the identity of the obligor or the existence or amount of arrearages. The Title IV-D agency shall provide an opportunity for a review, by telephonic conference or in person, as may be appropriate under the circumstances.

(b) After a review under this section, the Title IV-D agency may issue a new administrative writ of withholding to the employer, including a writ modifying the amount to be withheld or terminating withholding.

(c) If a review under this section fails to resolve any issue in dispute, the obligor may file a motion with the court to withdraw the administrative writ of withholding and request a hearing with the court not later than the 30th day after receiving notice of the agency's determination. Income withholding may not be interrupted pending a hearing by the court.

(d) If an administrative writ of withholding issued under this subchapter is based on an order of a tribunal of another state that has not been registered under Chapter 159, the obligor may file a motion with an appropriate court in accordance with Subsection (c).

§ 158.507. ADMINISTRATIVE WRIT TERMINATING WITHHOLDING.
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 child support arrearages, and Title IV-D service fees authorized under Section 231.103 for which the obligor is responsible, have been paid.

Title 5. The Parent-Child Relationship and the Suit Affecting the Parent-Child Relationship
Subtitle B. Suits Affecting the Parent-Child Relationship
Chapter 159. Uniform Interstate Family Support Act
Subchapter F. Enforcement of Order of Another State Without Registration

§ 159.501. EMPLOYER'S RECEIPT OF INCOME-WITHHOLDING ORDER OF ANOTHER STATE.

An income-withholding order issued in another state may be sent by or on behalf of the obligee or by the support enforcement agency to the person defined as the obligor's employer under Chapter 158 without first filing a petition or comparable pleading or registering the order with a tribunal of this state.

§ 159.502. EMPLOYER'S COMPLIANCE WITH INCOME-WITHHOLDING ORDER OF ANOTHER STATE.

(a) On receipt of an income-withholding order, the obligor's employer shall immediately provide a copy of the order to the obligor.

(b) The employer shall treat an income-withholding order issued in another state that appears regular on its face as if the order had been issued by a tribunal of this state.

(c) 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, whether in the form of periodic cash payments, stated as a sum certain, or ordering the obligor to provide health 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.

d) An employer shall comply with the law of the state of the obligor's principal place of employment for withholding from income with respect to:

(1) the employer's fee for processing an income-withholding order;

(2) the maximum amount permitted to be withheld from the obligor's income; and

(3) the times within which the employer must implement the withholding order and forward the child support payment.

§ 159.503. EMPLOYER'S COMPLIANCE WITH TWO OR MORE INCOME-WITHHOLDING ORDERS.

If an obligor's employer receives two or more income-withholding orders with respect to the earnings of the same obligor, the employer satisfies the terms of the orders if the employer complies with the law of the state of the obligor's principal place of employment to establish the priorities for withholding and allocating income withheld for two or more child support obligees.

§ 159.504. IMMUNITY FROM CIVIL LIABILITY.
An employer who complies with an income-withholding order issued in another state in accordance with this subchapter is not subject to civil liability to an individual or agency with regard to the employer's withholding of child support from the obligor's income.

§ 159.505. PENALTIES FOR NONCOMPLIANCE.

An employer who willfully fails to comply with an income-withholding order issued by another state and received for enforcement is subject to the same penalties that may be imposed for noncompliance with an order issued by a tribunal of this state.

§ 159.506. CONTEST BY OBLIGOR.

(a) An obligor may contest the validity or enforcement of an income-withholding order issued in another state and received directly by an employer in this state by registering the order in a tribunal of this state and:

(1) filing a contest to that order under Subchapter G; or

(2) contesting the order in the same manner as if the order had been issued by a tribunal of this state.

(b) The obligor shall give notice of the contest to:

(1) a support enforcement agency providing services to the obligee;

(2) each employer that has directly received an income-withholding order relating to the obligor; and

(3) the person designated to receive payments in the income-withholding order or to the obligee, if no person is designated.

§ 159.507. ADMINISTRATIVE ENFORCEMENT OF ORDERS.
(a) A party or support enforcement agency seeking to enforce a support order or an income-withholding order, or both, issued by a tribunal of another state may send the documents required for registering the order to a support enforcement agency of this state.

(b) On receipt of the documents, the support enforcement agency, without initially seeking to register the order, shall consider and, if appropriate, use any administrative procedure authorized by the law of this state to enforce a support order or an income-withholding order, or both. If the obligor does not contest administrative enforcement, the order need not be registered. If the obligor contests the validity or administrative enforcement of the order, the support enforcement agency shall register the order under this chapter.

Medical Support

FAMILY CODE

Title 5. The Parent-Child Relationship and the Suit Affecting the Parent-Child Relationship

Subtitle B. Suits Affecting the Parent-Child Relationship

Chapter 154. Child Support

Subchapter D. Medical Support for Child

§ 154.181. MEDICAL SUPPORT ORDER.

(a) The court shall render an order for the medical support of the child as provided by this section and Section 154.182 in:

(1) a proceeding in which periodic payments of child support are ordered under this chapter or modified under Chapter 156;

(2) any other suit affecting the parent-child relationship in which the court determines that medical support of the child must be established, modified, or clarified; or
(3) a proceeding under Chapter 159.

(b) 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 statement:

(1) if private health insurance is in effect for the child, the identity of the insurance company 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; or

(2) if private health insurance is not in effect for the child, whether:

(A) the child is receiving medical assistance under Chapter 32, Human Resources Code;

(B) the child is receiving health benefits coverage under the state child health plan under Chapter 62, Health and Safety Code, and the cost of any premium; and

(C) either parent has access to private health insurance at reasonable cost to the obligor .

(c) In rendering temporary orders, the court shall, except for good cause shown, order that any health 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 health insurance that is not available to the parent at reasonable cost to the obligor. If there is no health insurance coverage 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 health care coverage for the child as provided under Section 154.182.

(d) On rendering a final order the court shall:

(1) make specific findings with respect to the manner in which health care coverage is to be provided for the child, in accordance with the priorities identified under Section 154.182; and

(2) except for good cause shown or on agreement of the parties, require the parent ordered to provide health care coverage for the child as provided under Section 154.182 to produce evidence to the court's satisfaction that the parent has applied for or secured
health insurance or has otherwise taken necessary action to provide for health care coverage for the child, as ordered by the court.

(e) In this section, "reasonable cost" means the cost of health insurance coverage for a child that does not exceed nine percent of the obligor's annual resources, as described by Section 154.062(b), if the obligor is responsible under a medical support order for the cost of health insurance coverage for only one child. If the obligor is responsible under a medical support order for the cost of health insurance coverage for more than one child, "reasonable cost" means the total cost of health insurance coverage for all children for which the obligor is responsible under a medical support order that does not exceed nine percent of the obligor's annual resources, as described by Section 154.062(b).

§ 154.182. HEALTH CARE COVERAGE FOR CHILD.

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

(b) In determining the manner in which health care coverage 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 would not be in the best interest of the child:

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

(2) if health 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 health insurance for the child; or

(3) if health insurance coverage is not available for the child under Subdivision (1) or (2), the court shall order the obligor to pay the obligee, in addition to any amount ordered under the guidelines for child support, an amount, not to exceed nine percent of the obligor's monthly resources, as described by Section 154.062(b), as cash medical support for the child.
(b-1) If the parent ordered to provide health insurance under Subsection (b)(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 health insurance for the child, but not to exceed a reasonable cost to the obligor. In calculating the actual cost of health insurance for the child, if the obligee has other minor dependents covered under the same health 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.

(b-2) If the court finds that neither parent has access to private health 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 a government medical assistance program or health plan. If the child participates in a government medical assistance program or health plan, the court shall order cash medical support under Subsection (b)(3).

(b-3) An order requiring the payment of cash medical support under Subsection (b)(3) must allow the obligor to discontinue payment of the cash medical support if:

1. health insurance for the child becomes available to the obligor at a reasonable cost; and
2. the obligor:
   A. enrolls the child in the insurance plan; and
   B. provides the obligee and, in a Title IV-D case, the Title IV-D agency, the information required under Section 154.185.

(c) In this section:

1. "Accessibility" means the extent to which health insurance coverage for a child provides for the availability of medical care within a reasonable traveling distance and time from the child's primary residence, as determined by the court.
2. "Reasonable cost" has the meaning assigned by Section 154.181(e).

(d) Repealed by Acts 2009, 81st Leg., ch. 767, § 37.

§ 154.1826. HEALTH CARE PROGRAM FOR CERTAIN CHILDREN IN TITLE IV-D CASES.
(a) In this section:

(1) "Health benefit plan issuer" means an insurer, health maintenance organization, or other entity authorized to provide health benefits coverage under the laws of this state.

(2) "Health care provider" means a physician or other person who is licensed, certified, or otherwise authorized to provide a health care service in this state.

(3) "Program" means the child health care program developed under this section.

(4) "Reasonable cost" has the meaning assigned by Section 154.181(e).

(5) "Third-party administrator" means a person who is not a health benefit plan issuer or agent of a health benefit plan issuer and who provides administrative services for the program, including processing enrollment of eligible children in the program and processing premium payments on behalf of the program.

(b) In consultation with the Texas Department of Insurance, the Health and Human Services Commission, and representatives of the insurance industry in this state, the Title IV-D agency shall develop and implement a statewide program to address the health care needs of children in Title IV-D cases for whom health insurance is not available to either parent at reasonable cost under Section 154.182(b)(1) or under Section 154.182(b)(2) from a source other than the program.

(c) The director of the Title IV-D agency may establish an advisory committee to consult with the director regarding the implementation and operation of the program. If the director establishes an advisory committee, the director may appoint any of the following persons to the advisory committee:

(1) representatives of appropriate public and private entities, including state agencies concerned with health care management;

(2) members of the judiciary;

(3) members of the legislature; and

(4) representatives of the insurance industry.
(d) The principal objective of the program is to provide basic health care services, including office visits with health care providers, hospitalization, and diagnostic and emergency services, to eligible children in Title IV-D cases at reasonable cost to the parents obligated by court order to provide medical support for the children.

(e) The Title IV-D agency may use available private resources, including gifts and grants, in administering the program.

(f) The Title IV-D agency shall adopt rules as necessary to implement the program. The Title IV-D agency shall consult with the Texas Department of Insurance and the Health and Human Services Commission in establishing policies and procedures for the administration of the program and in determining appropriate benefits to be provided under the program.

(g) A health benefit plan issuer that participates in the program may not deny health care coverage under the program to eligible children because of preexisting conditions or chronic illnesses. A child who is determined to be eligible for coverage under the program continues to be eligible until the termination of the parent's duty to pay child support as specified by Section 154.006. Enrollment of a child in the program does not preclude the subsequent enrollment of the child in another health care plan that becomes available to the child's parent at reasonable cost, including a health care plan available through the parent's employment or the state child health plan under Chapter 62, Health and Safety Code.

(h) The Title IV-D agency shall contract with an independent third-party administrator to provide necessary administrative services for operation of the program.

(i) A person acting as a third-party administrator under Subsection (h) is not considered an administrator for purposes of Chapter 4151, Insurance Code.

(j) The Title IV-D agency shall solicit applications for participation in the program from health benefit plan issuers that meet requirements specified by the agency. Each health benefit plan issuer that participates in the program must hold a certificate of authority issued by the Texas Department of Insurance.

(k) The Title IV-D agency shall promptly notify the courts of this state when the program has been implemented and is available to provide for the health care needs of children described by Subsection (b). The notification must specify a date beginning on which children may be enrolled in the program.
(l) On or after the date specified in the notification required by Subsection (k), a court that orders health care coverage for a child in a Title IV-D case shall order that the child be enrolled in the program authorized by this section unless other health insurance is available for the child at reasonable cost, including the state child health plan under Chapter 62, Health and Safety Code.

(m) Payment of premium costs for the enrollment of a child in the program may be enforced by the Title IV-D agency against the obligor by any means available for the enforcement of a child support obligation, including income withholding under Chapter 158.

(n) The program is not subject to any provision of the Insurance Code or other law that requires coverage or the offer of coverage of a health care service or benefit.

(o) Any health information obtained by the program, or by a third-party administrator providing program services, that is subject to the Health Insurance Portability and Accountability Act of 1996 (42 U.S.C. Section 1320d et seq.) or Chapter 181, Health and Safety Code, is confidential and not open to public inspection. Any personally identifiable financial information or supporting documentation of a parent whose child is enrolled in the program that is obtained by the program, or by a third-party administrator providing program services, is confidential and not open to public inspection.

§ 154.1827. ADMINISTRATIVE ADJUSTMENT OF MEDICAL SUPPORT ORDER.

(a) In each Title IV-D case in which a medical support order requires that a child be enrolled in a health care program under Section 154.1826, the Title IV-D agency may administratively adjust the order as necessary on an annual basis to reflect changes in the amount of premium costs associated with the child's enrollment.

(b) The Title IV-D agency shall provide notice of the administrative adjustment to the obligor and the clerk of the court that rendered the order.

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

(1) is in addition to the amount that the obligor is required to pay for child support under the guidelines for child support;

(2) is a child support obligation; and

(3) may be enforced by any means available for the enforcement of child support, including withholding from earnings under Chapter 158.

(b) If the court finds and states in the child support order that the obligee will maintain health insurance coverage 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 health insurance coverage, as provided under Section 154.182(b-1).

(c) As additional child support, the court shall allocate 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 insurance or are not otherwise covered by the amount of cash medical support ordered under Section 154.182(b)(3); and

(2) amounts paid by either party as deductibles or copayments in obtaining health care services for the child covered under a health insurance policy.

§ 154.184. EFFECT OF ORDER.

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

(b) If the employee or member is eligible for dependent health 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 under Section 154.186 on the same terms and conditions as apply to any other dependent child.
(c) The employer shall notify the insurer of the automatic enrollment.

(d) During the 31-day period, the employer and insurer shall complete all necessary forms and procedures to make the enrollment permanent or shall report in accordance with this subchapter the reasons the coverage cannot be made permanent.

§ 154.185. PARENT TO FURNISH INFORMATION.

(a) The court shall order a parent providing health 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;
3. whether the employer is self-insured or has health insurance available;
4. proof that health insurance has been provided for the child;
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
6. 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 to furnish the obligor, obligee, or child support agency with additional information regarding health insurance coverage not later than the 15th day after the date the information is received by the parent.

§ 154.186. NOTICE TO EMPLOYER CONCERNING MEDICAL SUPPORT.

(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 for a child or may include notice of the medical support order in an order or writ of withholding sent to the employer in accordance with Chapter 158.
(b) In an appropriate Title IV-D case, the Title IV-D agency of this state or another state shall send to the employer the national medical support notice required under Part D, Title IV of the federal Social Security Act (42 U.S.C. Section 651 et seq.), as amended. The notice may be used in any other suit in which an obligor is ordered to provide health insurance coverage for a child.

(c) The Title IV-D agency by rule shall establish procedures consistent with federal law for use of the national medical support notice and may prescribe forms for the efficient use of the notice. The agency shall provide the notice and forms, on request, to obligees, obligors, domestic relations offices, friends of the court, and attorneys.

§ 154.187. DUTIES OF EMPLOYER.

(a) An order or notice under this subchapter to an employer directing that health 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 for the child, the employer shall immediately enroll the child in a health 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 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, the employer shall deduct the health 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 is already enrolled in another health insurance plan in accordance with a previous child support or medical 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 and provide the reason why coverage or permanent coverage cannot be provided.

(d) If the employee ceases employment or if the health insurance coverage lapses, the 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, including the name of the health insurance carrier, the policy number, a copy of the policy and schedule of benefits, a health insurance membership card, and claim forms.

(f) In this section, "sender" means the person sending the order or notice under Section 154.186.

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

(h) An employer who receives a national medical support notice under Section 154.186 shall comply with the requirements of the notice.

§ 154.188. FAILURE TO PROVIDE OR PAY FOR REQUIRED HEALTH INSURANCE.

A parent ordered to provide health insurance or to pay the other parent additional child support for the cost of health insurance who fails to do so is liable for:

(1) necessary medical expenses of the child, without regard to whether the expenses would have been paid if health insurance had been provided; and

(2) the cost of health insurance premiums or contributions, if any, paid on behalf of the child.
§ 154.189. NOTICE OF TERMINATION OR LAPSE OF INSURANCE COVERAGE.

(a) An obligor ordered to provide health 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 for the child not later than the 15th day after the date of a termination or lapse; and

(2) availability of additional health 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 for a child or notice of the medical support order as provided by this subchapter.

§ 154.190. REENROLLING CHILD FOR INSURANCE COVERAGE.

After health insurance has been terminated or has lapsed, an obligor ordered to provide health insurance coverage for the child must enroll the child in a health insurance plan at the next available enrollment period.

§ 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.

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

§ 154.192. CANCELLATION OR ELIMINATION OF INSURANCE COVERAGE FOR CHILD.
(a) Unless the employee or member ceases to be eligible for dependent coverage, or the employer has eliminated dependent health 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.

§ 154.193. MEDICAL SUPPORT ORDER NOT QUALIFIED.

(a) If a plan administrator or other person acting in an equivalent position determines that a medical 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.

(b) The procedure for filing a motion for enforcement of a final order applies to a motion under this section. Service of citation is not required, and a person is not entitled to a jury in a proceeding under this section.

(c) The employer or plan administrator is not a necessary party to a proceeding under this section.

Title 5. The Parent-Child Relationship and the Suit Affecting the Parent-Child Relationship

Subtitle B. Suits Affecting the Parent-Child Relationship

Chapter 158. Withholding from Earnings for Child Support

Subchapter C. Rights and Duties of Employer

§ 158.210. FINE FOR NONCOMPLIANCE.
(a) In addition to the civil remedies provided by this subchapter or any other remedy provided by law, an employer who knowingly violates the provisions of this chapter may be subject to a fine not to exceed $200 for each occurrence in which the employer fails to:

(1) withhold income for child support as instructed in an order or writ issued under this chapter; or

(2) remit withheld income within the time required by Section 158.203 to the payee identified in the order or writ or to the state disbursement unit.

(b) A fine recovered under this section shall be paid to the county in which the obligee resides and shall be used by the county to improve child support services.

State Disbursement Unit

FAMILY CODE

Title 5. The Parent-Child Relationship and the Suit Affecting the Parent-Child Relationship

Subtitle D. Administrative Services

Chapter 234. State Case Registry, Disbursement Unit, and Directory of New Hires

Subchapter A. Unified State Case Registry and Disbursement Unit

§ 234.001. ESTABLISHMENT AND OPERATION OF STATE CASE REGISTRY AND STATE DISBURSEMENT UNIT.

(a) The Title IV-D agency shall establish and operate a state case registry and state disbursement unit meeting the requirements of 42 U.S.C. Sections 654a (e) and 654b and this subchapter.

(b) The state case registry shall maintain records of child support orders in Title IV-D cases and in other cases in which a child support order has been established or modified in this state on or after October 1, 1998.
(c) The state disbursement unit shall:

(1) receive, maintain, and furnish records of child support payments in Title IV-D cases and other cases as authorized by law;

(2) forward child support payments as authorized by law;

(3) maintain records of child support payments made through the state disbursement unit; and

(4) make available to a local registry each day in a manner determined by the Title IV-D agency the following information:

   (A) the cause number of the suit under which withholding is required;

   (B) the payor's name and social security number;

   (C) the payee's name and, if available, social security number;

   (D) the date the disbursement unit received the payment;

   (E) the amount of the payment; and

   (F) the instrument identification information.

(d) A certified child support payment record produced by the state disbursement unit is admissible as evidence of the truth of the information contained in the record and does not require further authentication or verification.

Termination of Employment

Wage withholding

FAMILY CODE

Title 5. The Parent-Child Relationship and the Suit Affecting the Parent-Child Relationship
Subtitle B. Suits Affecting the Parent-Child Relationship

Chapter 158. Withholding from Earnings for Child Support

Subchapter C. Rights and Duties of Employer

§ 158.211. NOTICE OF TERMINATION OF EMPLOYMENT AND OF NEW EMPLOYMENT.

(a) If an obligor terminates employment with an employer who has been withholding income, both the obligor and the employer shall notify the court or the Title IV-D agency and the obligee of that fact not later than the seventh day after the date employment terminated and shall provide the obligor's last known address and the name and address of the obligor's new employer, if known.

(b) The obligor has a continuing duty to inform any subsequent employer of the order or writ of withholding after obtaining employment.

Dependent health insurance

Title 5. The Parent-Child Relationship and the Suit Affecting the Parent-Child Relationship

Subtitle B. Suits Affecting the Parent-Child Relationship

Chapter 154. Child Support

Subchapter D. Medical Support for Child

§ 154.187. DUTIES OF EMPLOYER.

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(d) If the employee ceases employment or if the health insurance coverage lapses, the 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.

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