

**252H Administrative Order
For Modification of a Support Obligation**

Foster Care Recovery **Child Support Recovery Unit**
Iowa Department of Human Services
Docket No: _____

This matter is before the Foster Care Child Support Recovery Unit (referred to as the "Unit"), for the modification of the controlling support order, according to Iowa Code section 252B.5(8) and Iowa Code chapter 252H.¹ The Unit **FINDS:**

1. The Unit has jurisdiction over the subject matter, according to Iowa Code section 252B5.(8), and Iowa is the proper state in which to enter an order for support, according to Iowa Code chapters 252H and 252K and no party has made a timely request for a court hearing.
2. Pursuant to Iowa Code section 252K.201, the Unit has personal jurisdiction over the payor because the payor resides in Iowa. requested this modification and waives any contest to personal jurisdiction. is a party to the order(s) under review or the payor has acquiesced to personal jurisdiction of the State of Iowa. submitted to the jurisdiction of the State of Iowa by consent in a record.
3. Pursuant to Iowa Code section 252K.201, the Unit has personal jurisdiction over the payee because the payee resides in Iowa. requested this modification and waives any contest to personal jurisdiction. is a party to the order(s) under review or the payee has acquiesced to personal jurisdiction of the State of Iowa. submitted to the jurisdiction of the State of Iowa by consent in a record.
4. Pursuant to Iowa Code section 252K.201, the Unit has personal jurisdiction over the necessary third party because the necessary third party resides in Iowa. requested this modification and waives any contest to personal jurisdiction. is a party to the order(s) under review or the necessary third party has acquiesced to personal jurisdiction of the State of Iowa. submitted to the jurisdiction of the State of Iowa by consent in a record.
5. _____ is the caretaker of the minor child(ren) and notice of this action with all requirements of Iowa Code section 252H.15 was served on the following necessary parties who appeared as follows:

	Name	Relationship to Affected Child(ren)	State of Residence ²	Party Appeared
Payor ³	_____	_____	_____	<input type="checkbox"/> Did not appear <input type="checkbox"/> Servicemember submitted request for modification <input type="checkbox"/> Without an attorney <input type="checkbox"/> Had contact with CSRU by telephone <input type="checkbox"/> Provided financial statement <input type="checkbox"/> Represented by _____
Payee ⁴	_____	_____	_____	<input type="checkbox"/> Did not appear <input type="checkbox"/> Servicemember submitted request for modification <input type="checkbox"/> Without an attorney

<input type="checkbox"/> Third Party ⁵	_____	_____	_____	<input type="checkbox"/> Had contact with CSRU by telephone <input type="checkbox"/> Provided financial statement <input type="checkbox"/> Represented by _____ <input type="checkbox"/> Did not appear <input type="checkbox"/> Servicemember submitted request for modification <input type="checkbox"/> Without an attorney <input type="checkbox"/> Had contact with CSRU by telephone <input type="checkbox"/> Provided financial statement <input type="checkbox"/> Represented by _____
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The children affected by the ongoing support order(s) are:

Affected Child's Initials	Year of Birth	State of Residence ⁶	Period of Residence	Child's Home State ⁷	Child Currently Residing with:
_____	_____	_____	through	_____	_____
_____	_____	_____	through	_____	_____
_____	_____	_____	through	_____	_____
_____	_____	_____	through	_____	_____
_____	_____	_____	through	_____	_____

The child affected by the ongoing support order is:

Affected Child's Initials	Year of Birth	State of Residence ⁸	Period of Residence	Child's Home State ⁹	Child Currently Residing with:
_____	_____	_____	through	_____	_____

The child affected by the ongoing support order is:

Affected Child's Initials	Year of Birth	Child Currently Residing with:
_____	_____	_____

The children affected by the ongoing support order(s) are:

Affected Child's Initials	Year of Birth	Child Currently Residing with:
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

The Unit considered the following ongoing support order¹⁰:

Issuing State	Issuing County	Docket Number	File Stamped Date	Support Amount
_____	_____	_____	_____	\$_____ per _____

The Unit considered the following ongoing support orders to identify which order is/are controlling:¹¹

Issuing State	Issuing County	Docket Number	File Stamped Date	Support Amount
_____	_____	_____	_____	\$_____ per _____
_____	_____	_____	_____	\$_____ per _____
_____	_____	_____	_____	\$_____ per _____
_____	_____	_____	_____	\$_____ per _____
_____	_____	_____	_____	\$_____ per _____

6. <PAYEE> has a health benefit plan¹² available to cover the child(ren) and should be ordered to provide coverage. The plan is accessible and the cost is reasonable, as provided by Iowa Code chapter 252E. The cost to add the child(ren) is not more than <\$amount> per month, which is determined to be reasonable.
- <PAYOR> has a health benefit plan¹³ available to cover the child(ren) and should be ordered to provide coverage. The plan is accessible and the cost is reasonable, as provided by Iowa Code chapter 252E. The cost to add the child(ren) is not more than <\$amount> per month, which is determined to be reasonable.
- <MEDICAID PARENT> has a health benefit plan¹⁴ available to cover the child(ren). Based on Iowa Code section 252E.1B(3)(e), <MEDICAID PARENT> should be ordered to provide coverage.
- <PAYEE> has a health benefit plan¹⁵ available to cover the child(ren). Based on Iowa Code section 252E.1B(2)(e), <PAYEE> should be ordered to provide coverage, and <PAYOR> should be ordered to pay cash medical support.
- <PAYEE> has a health benefit plan¹⁶ available to cover the child(ren). <PAYOR> meets an exception to paying cash medical support. Based on Iowa Code section 252E.1B(2)(e), both <PAYEE> and <PAYOR> should be ordered to provide health care coverage.
- Neither parent has an available health benefit plan¹⁷ to cover the child(ren), as provided in Iowa Code chapter 252E. <PAYOR> should be ordered to pay cash medical support.

Neither parent has an available health benefit plan¹⁸ to cover the child(ren), as provided in Iowa Code chapter 252E. Based on Iowa Code section 252E.1B(2)(e), <PAYOR> should be ordered to pay cash medical support, but because an exception exists, <PAYOR> should be ordered to provide health care coverage.

<PAYEE>/<PAYOR> has a health benefit plan¹⁹ available to cover the children, as provided in Iowa Code chapter 252E. The plan is accessible, but the cost to add the child(ren) exceeds the reasonable cost amount of \$_____ per month, as set forth by the Iowa child support guidelines. <PAYEE>/<PAYOR> consents to the cost of the health benefit plan.

<PAYEE>/<PAYOR> has a health benefit plan²⁰ available to cover the children, as provided in Iowa Code chapter 252E. The cost to add the child(ren) is reasonable. The plan is not accessible as provided in Iowa Code section 252E.1. <PAYEE> and <PAYOR> consent to the health benefit plan.

The provisions for medical support, if any, set or reserved by the controlling order, other than any provisions for uncovered medical support, are unchanged by this order.

Other: _____

Neither parent has an available health benefit plan²¹ to cover the child(ren), as provided in Iowa Code chapter 252E. The parents share court-ordered joint physical care. Therefore, the unit will not seek an order for medical support from either parent at this time.

7. The Unit considered the support orders listed in the *Computation of Reconciliation of Arrears (Computation)* attached as State's Exhibit "A" to determine the amount of the arrearages due.

THEREFORE, the Unit, according to Iowa Code chapter 252H, **CONCLUDES AND ORDERS:**

1. The support order in this case was determined to be the controlling order by the State of _____, County of _____, Docket Number _____, by an order entered on _____, _____.

1. According to the standards of Iowa Code section 252K.207, the controlling ongoing support order is the _____ order entered in _____ County, Docket Number _____. This order is controlling

because it is the only known ongoing support order in existence.

because it was issued by the only tribunal that has continuing, exclusive jurisdiction.

although more than one tribunal has continuing, exclusive jurisdiction, it was issued by a tribunal that has continuing, exclusive jurisdiction and is the home state of the child(ren).

because it was the most recent ongoing support order issued by a tribunal with continuing, exclusive jurisdiction, and _____, the current home state of the child(ren) has not issued a support order.

because it was the most recent ongoing support order issued by a tribunal with continuing, exclusive jurisdiction, and neither _____, the home state of the child(ren) _____, nor _____, the home state of the child(ren) _____, has issued support orders.

1. According to the standards of Iowa Code section 252K.207, the controlling ongoing support order is the Iowa order entered in _____ County, Docket Number _____, and the Iowa order entered in _____ County, Docket Number _____, and the Iowa order entered in _____ County, Docket Number _____. According to Iowa Code section 252A.6, no Iowa order supersedes any previous Iowa order. All Iowa orders run concurrently and were reviewed together.

These orders are controlling because they were issued by the only tribunal that has continuing, exclusive jurisdiction.

These orders are controlling because they were issued by the only tribunal that has issued orders.

1. According to the standards of Iowa Code section 252K.207, the controlling ongoing support order for _____ is the _____ order entered in _____ County, Docket Number _____, and the controlling order for _____ is the _____ order entered in _____ County, Docket Number _____. These orders are controlling because, although more than one tribunal has continuing, exclusive jurisdiction, these orders were issued in the children's respective home states by tribunals with continuing, exclusive jurisdiction.

2. Effective on the date the Court approves this administrative order, the controlling order(s), as modified, is/are the only enforceable ongoing support obligation(s). In the event there is another existing order, the ongoing support obligation set by the other orders is terminated and unenforceable.

However, support arrearages that accrued as of the date this administrative order is approved by the court are due and owing. Payments on all support orders shall be credited according to Iowa Code section 252K.209.

Under Iowa Code section 252A.6(7), a support order does not supersede any previous order of support, but the amounts paid for a particular period pursuant to either order shall be credited against amounts accruing or accrued for the same period under both. Under Iowa Code section 252K.209, amounts collected and credited for a particular period pursuant to an order issued by another state must be credited against amounts accruing or accrued for the same period under an order issued in this state.

The amount of the arrears is \$ _____ as of _____. Interest is included in this amount only insofar as it is included in the *Computation* attached to this order and incorporated herein by this reference. Since the State of Iowa does not compute or collect interest that is not reduced to a judgment, interest is only included in the *Computation* to the extent that it has been charged by another state or has been reduced to a judgment by a court order. The arrears amount herein does not prejudice the rights of the payee to pursue other interest amounts not specified in the *Computation* or other types of arrearages not specified in the *Computation*, including but not limited to past unreimbursed medical expenses, as allowed under law. Issues relating to other types of arrearages and other accumulating interest are reserved.

3. There has been a substantial change in the financial circumstances of _____ in that his/her net income has changed by at least 50 percent and that change is due to financial circumstances that have existed for at least three months and can be reasonably expected to continue for at least an additional three months.

The following child(ren) for whom _____ is financially responsible need to be added to the support obligation:

Child's Initials	Year of Birth
_____	_____
_____	_____
_____	_____

The dollar amount of the support obligation was previously reserved or set at zero; however, circumstances have changed and support should be ordered.

The dollar amount of the child support obligation was not previously set. The order is for medical support provisions only; however, circumstances have changed and child support should be ordered.

An error or omission in child support and/or medical support provisions was made when the order was prepared or filed. _____

At the time the order was entered, _____ was a minor, and consequently the support obligation was reduced or waived. Since that time, circumstances have changed in that:

- _____ is no longer a minor.
- _____ is not complying with requirements to attend parenting classes.
- _____ is not complying with educational requirements.

A cost of living alteration for the child support obligation under this order was calculated in accordance with Iowa Code section 252H.21, by the Child Support Recovery Unit based on a request for such an alteration submitted to the Child Support Recovery Unit by _____. All necessary parties have signed a written statement agreeing to the cost of living alteration of the support order. The amount was calculated by applying the percentage change of the consumer price index for all urban consumers, United States city average (as published in the federal register by the federal department of labor, bureau of labor statistics) to the amount of the existing child support obligation, compounded annually since the order was entered or last modified.

The support obligation should be modified based on the parents' present circumstances²². This modification deviates from the Iowa Supreme Court Guidelines. The amount of support that would be due for the child(ren) by applying the guidelines is \$ _____ per _____. The support order deviates for the following reasons: _____ This modification is in accordance with the Iowa Supreme Court Guidelines.

4. The payor receives Supplemental Security Income (SSI) and has no other known source of income or assets from which support can be paid. Support is set at zero in accordance with the guidelines.

4. Following the approval of this administrative order, the payor shall pay the modified amount of support, \$ _____ per _____, for the child(ren) listed in this order. This amount is effective on the first date that the next support payment is due according to the terms of the prior support order(s) and continues _____ thereafter.

The multiple orders are reconciled as follows:

Primary Order _____ child(ren)	Court Order # _____
Modified Obligation Amount	\$ _____
Frequency	per _____
Effective Date	_____

Second Order _____ child(ren)	Court Order # _____
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Reconciliation Amount (see 7 on reconciliation worksheet)	Due: _____
\$ _____ 7	

Summary of payments/obligations	Due: _____
\$ _____ 1	Due: _____
\$ _____ 7	Due: _____
\$ _____ 2	

<input type="checkbox"/> Third Order _____ child(ren)	Court Order # _____
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Reconciliation Amount (see 7 on reconciliation worksheet)	Due: _____
\$ _____ 7	

Summary of payments/obligations

\$ _____ ①
 \$ _____ ⑦
 \$ _____ ②

Due: _____
 Due: _____
 Due: _____

5. Support for each child added continues as long as the child remains in Foster Care and the Department is incurring expenses for the child in a Foster Care placement or until the child reaches the age of eighteen (18) years. If the child remains in foster care placement and is engaged full-time in completing high school graduation or equivalency requirements, and is reasonably expected to complete these requirements before age nineteen (19), support continues until high school graduation or equivalency requirements are met. The conditions for ending the ongoing support obligation for each other child are unchanged by this action. Support shall continue for those children for the duration set by the prior court order which is to be modified by this action.

The conditions for ending the ongoing support obligation for each child are unchanged by this action.

Any terms for determining the number of children entitled to current ongoing support contained in prior orders in this case, if any, are unchanged by this order. The ongoing support obligation for the child(ren) named shall be adjusted without further court order, to correspond to the number of children entitled to current support as this number changes. The obligation amount is:

Number of Children Entitled to Support

\$ Amount per _____

\$ _____
 \$ _____
 \$ _____
 \$ _____
 \$ _____
 \$ _____
 \$ _____

Any prior proration of the obligation among the children entitled to support is void. If there are multiple payees, the support will be divided and distributed equally among the children.

Support will remain at zero as the number of children entitled to support changes or until this order is modified.

6. <PAYEE> shall provide, as medical support, health care coverage for the child(ren) as provided in Iowa Code chapter 252E.

6. <PAYOR> shall provide, as medical support, health care coverage for the child(ren) as provided in Iowa Code chapter 252E.

6. <PAYEE> shall provide, as medical support, health care coverage for the child(ren) as provided in Iowa Code chapter 252E. <PAYOR> shall pay cash medical support in the amount of <\$amount> per <frequency>, beginning on the first date that the next child support payment is due according to the terms of the prior support order(s) and continues <frequency> thereafter. It is payable to Collection Services Center. <PAYOR> shall pay cash medical support in the amount of <\$amount> per <frequency>, beginning on the __ day of _____, _____. This payment is due <frequency> thereafter. It is payable to Collection Services Center.

6. <PAYEE> shall provide, as medical support, health care coverage for the child(ren) as provided in Iowa Code chapter 252E. <PAYOR> shall provide health care coverage that covers the child(ren) when a plan becomes available. However, there must be no cost to add the child(ren) to the plan. <PAYOR> shall provide health care coverage that covers the child(ren), when it becomes available at reasonable cost. Reasonable cost in this case is not more than <\$amount> per month to add the child(ren).

6. Following the approval of this order, _____ shall pay cash medical support in the amount of \$_____ per _____, beginning on the first date that the next child support payment is due according to

the terms of the prior support order(s) and continues _____ thereafter. It is payable to Collection Services Center.

- 6. _____ shall pay cash medical support in the amount of \$_____ per _____, beginning on the ____ day of _____, _____. This payment is due _____ thereafter. It is payable to Collection Services Center.
- 6. <PAYOR> shall provide health care coverage that covers the child(ren) when a plan becomes available. However, there must be no cost to add the child(ren) to the plan.
- 6. <PAYOR> shall provide a health care coverage that covers the child(ren), when it becomes available at reasonable cost. Reasonable cost in this case is not more than <\$amount> per month to add the child(ren).
- 6. By consent, <PAYEE>/<PAYOR> shall provide, as medical support, health care coverage for the child(ren), as provided in Iowa Code chapter 252E.
- 6. By consent of <PAYEE> and <PAYOR> to the otherwise non-accessible health care coverage, <PAYEE>/<PAYOR> shall provide, as medical support, health care coverage for the child(ren) as provided in Iowa Code chapter 252E.
- 6. The provisions for medical support, if any, set or reserved by the controlling order, other than any provisions for uncovered medical expenses, are unchanged by this order.
- 6. Other: _____.
- 6. Neither parent is ordered to provide health care coverage or cash medical support at this time. Medical support is reserved.
 - Medical support provisions also apply to any child being added by this order.
 - Cash medical Medical support continues until the child(ren) reaches the age of eighteen (18) years or becomes emancipated. If the child(ren) is engaged full-time in completing high school graduation or equivalency requirements, and is reasonably expected to complete these requirements before age nineteen (19), support continues until high school graduation or equivalency requirements are met.
 - The conditions for ending the ongoing obligation for each child are unchanged by this action.
 - The payor shall pay 0% of uncovered medical expenses for the child(ren).
 - If uncovered medical expenses for the child(ren) exceed \$250.00 per calendar year per child, up to a maximum of \$800.00 per calendar year for all children, _____ shall pay ____% of the excess cost as provided by the Iowa Supreme Court Guidelines.
 - _____ shall pay _____% and _____ shall pay _____% of uncovered medical expenses for the child(ren).
 - The uncovered medical expenses provisions of the Iowa Supreme Court Guidelines do not apply under this order.
 - The payor shall pay ____% of any uncovered medical expenses for the child(ren).
 - _____ qualified for a medical satisfaction pursuant to Iowa Code section 252E.2A, effective _____ that remains in effect and is not changed or negated by this order.
- 7. Upon termination of public assistance (if any), the Collection Services Center shall pay any current support to the named caretaker, unless payments are redirected to another caretaker or unless there has been an automatic redirection by statute.

7. 8. All payments ordered shall be payable to the **COLLECTION SERVICES CENTER, P.O. BOX 9125, DES MOINES, IOWA 50306-9125, AND IN NO OTHER MANNER.** Each payment shall identify the payor, payee/caretaker, and the following CSC number(s): _____ _____ _____. Any payment sent directly to the above named caretaker or the child(ren) by the payor shall be considered a gift and not credited to the support ordered.

8. 9. _____ shall pay the cost of this action.

8. 9. CSRU does not seek to recover costs advanced in this proceeding, including service fees, and none are assessed.

The parties are bound by the Notices which are below and incorporated.

Foster Care Child Support Recovery Unit by

Designee of the Administrator

Date

A review of the Unit's records and of the military's website reveals that _____ is _____ and _____ are _____, _____, and _____ are not in the military service (as defined by the Servicemembers Civil Relief Act).

I certify under penalty of perjury and pursuant to the laws of the State of Iowa that the preceding information about military status is true and correct as verified through the Defense Manpower Data Center.

Foster Care Child Support Recovery Unit by

Name: _____
Title: _____

Date

Copy to:

Foster Care Recovery

NOTICES

1. The income of the payor is subject to immediate income withholding, according to Iowa Code chapter 252D. Until the income provider withholds the required amount of support, it is the payor's responsibility to ensure payment is made to the Collection Services Center.

2. The installment payment method does not prevent the Unit from collecting the accrued support and/or any delinquent support by any means provided by law, including, but not limited to, an interception of income tax refunds, attachment of liens, income withholding, and levy of accounts at financial institutions. When payments become delinquent in an amount equal to the payment for one month, according to Iowa Code chapter 252D, the Court or the Unit may order the withholding for payment of support set at an amount in accordance with 441 IAC chapter 98, division II, or according to Iowa Code chapter 252I, the Unit may execute an administrative levy on the Respondent's financial institutions.

3. According to Iowa Code section 598.22B, the payor, payee, and any necessary third party shall provide the Unit with written information about the person's identity, social security number, residential, mailing, and email addresses, telephone number, driver's license number, and the name, address, and telephone number of the party's current employer or other source of income and keep the Unit informed of any changes. Both parents shall also provide the Unit information about health insurance that is available, including health insurance policy information. If a later child support action is started and a diligent but unsuccessful effort is made to locate the party, due process requirements may be met by delivering a written notice to the most recent residential or employer address on file with the Unit.

4. According to Iowa Code section 252B.23, if support in arrears is referred to a collection entity, a surcharge may be assessed to the payor, and information may be provided to a collection entity for purposes of administering and enforcing the surcharge. The amount of the surcharge is a percentage of the amount in arrears.

5. Parties receiving notice of this modification action and failing to disclose the existence of other support orders which have not been considered may be barred from challenging the determination of controlling order in a later action.

¹ The modification was based on a request submitted by _____ at the initiative of the Unit.

² The party's state of residence at the time the Unit issued the Notice of Intent to Modify.

³ The parent obligated to pay support.

⁴ The person entitled to receive support on behalf of the child(ren).

⁵ This person may have an interest in the amount of support.

⁶ The child's state of residence at the time the Unit issued the Notice of Intent to Modify.

⁷ The home state of the child is the state where the child lived for at least six consecutive months immediately preceding the time of filing of a petition or comparable pleading for support. If the child is less than six months old, the state in which the child has lived since birth is the child's home state.

⁸ The child's state of residence at the time the Unit issued the Notice of Intent to Modify.

⁹ The home state of the child is the state where the child lived for at least six consecutive months immediately preceding the time of filing of a petition or comparable pleading for support. If the child is less than six months old, the state in which the child has lived since birth is the child's home state.

¹⁰ The parties have not disclosed, and the Court and the Unit are not aware of, any other ongoing support orders which affect the payor and the child(ren) named above.

¹¹ The parties have not disclosed, and the Court and the Unit are not aware of, any other ongoing support orders which affect the payor and the child(ren) named above.

¹² The health benefit plan may be provided by this parent or a stepparent of the child(ren).

¹³ The health benefit plan may be provided by this parent or a stepparent of the child(ren).

¹⁴ The health benefit plan may be provided by this parent or a stepparent of the child(ren).

¹⁵ The health benefit plan may be provided by this parent or a stepparent of the child(ren).

¹⁶ The health benefit plan may be provided by this parent or a stepparent of the child(ren).

¹⁷ The health benefit plan may be provided by this parent or a stepparent of the child(ren).

¹⁸ The health benefit plan may be provided by this parent or a stepparent of the child(ren).

¹⁹ The health benefit plan may be provided by this parent or a stepparent of the child(ren).

²⁰ The health benefit plan may be provided by this parent or a stepparent of the child(ren).

²¹ The health benefit plan may be provided by this parent or a stepparent of the child(ren).

²² See Iowa Code section 598.21C. Entry of a modified ongoing support order in Iowa will not violate 28 USC 1738B.