Iowa Department of Human Services

NOTICE THAT ORDER NO LONGER QUALIFIES FOR SATISFACTION OF MEDICAL SUPPORT

Date:	
Case Number:	_
Payor:	Payee: Satisfaction Start Date:
County:	Satisfaction Start Date:
Order Number:	Satisfaction End Date:
The medical support obligation of	is no longer satisfied ¹ starting
no longer meets any	of the conditions below:
• The parent is an inmate of a prison.	
under the medical support table (see the	
 The parent gets Family Investment Prograthese in another state. 	am (FIP) or Medicaid (Title 19) or programs like
	e is legally responsible for and that child gets lowa (<i>hawk-i</i>) or programs like these in another
	equired to provide medical support under this
order.	squired to provide medical support under this
	er providing services under Iowa Code Chapter
	county docket
terminated the medical satisfaction.	
If you have questions, contact:	at
	dt
Child Support Recovery Unit	
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Copy to:	
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