National Medical Support Notice (NMSN)

Employer Receives NMSN





Determine whether any question on the Employer Response form applies to you or this employee. If any question applies, complete the Employer Response form and return it to the child support agency within 20 business days. At this point you may not be able to determine whether question #4 applies.

Does any question on the Employer Response form apply?

If **YES** → Return Employer Response form to the child support agency.



If **NO** → Send Part B to plan administrator for enrollment.



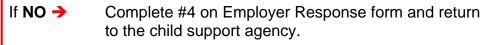
- The plan administrator will notify you when enrollment has been completed. The plan administrator has 40 business days to respond.
- Payroll calculates withholding deductions.
- Do deductions for employee's child and medical support exceed maximum allowable (by CCPA) for withholding?

If **YES →** Check state law of employee's principal place of employment to determine payment priority.

If **NO** → Withhold full amount for child and medical support.

Does state priority require payment for medical support first?

If **YES** → Withhold for medical support.







If enrollment cannot be completed until after a waiting period or other contingency, you must notify the plan administrator when the employee is eligible for enrollment. You should also notify the child support agency of the timeframe for enrollment.

OCSE Employer Services Website:www.acf.hhs.gov/programs/cse, Click on: Information for Employers