



Office of Temporary and Disability Assistance

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Office of Information and Regulatory Affairs
Office of Management and Budget
Executive Office of the President
<https://www.reginfo.gov/public/do/PRAMain>

RE: COMMENTS ON PROPOSED INFORMATION COLLECTION ACTIVITY: NATIONAL MEDICAL SUPPORT NOTICE – PART A, OMB No. 0970-0222, September 21, 2022, Federal Register, Vol. 87, No. 182, page 57701 - 57703

The New York State Office of Temporary and Disability Assistance (NYS OTDA) appreciates the opportunity provided by the Office of Management and Budget to comment on proposed revisions to the National Medical Support Notice (NMSN) – Part A, OMB 0970-0222. We welcome the opportunity to submit comments that will increase the effectiveness of the NMSN as an administrative tool for the enrollment of children in employment-based health insurance coverage. The following comments are provided for purposes of clarity and consistency. In particular, please note Comments 2, 13, 19, 20, and 26. Unless otherwise stated, NYS OTDA supports the current format and language of the NMSN – Part A.

NMSN – Part A

Comment 1, Page 1, First Paragraph

For purposes of consistency within this sentence and paragraph, NYS OTDA recommends the elimination of the space between “466(a)” and “(19).”

Comment 2, Page 1, Paperwork Reduction Act of 1995 Paragraph

The Paperwork Reduction Act of 1995 paragraph includes the parenthetical “(see email from Molly)” between “OMB” and “Expiration.” NYS OTDA recommends the removal of this parenthetical.

Comment 3, Page 3, Employer Response, Section 1 – No enrollment possible

For purposes of consistency with the titles of the other sections of the *Employer Response*, NYS OTDA recommends capitalization of the “e” in “enrollment” and “p” in “possible” so that each word in the section title is capitalized.

Comment 4, Page 3, Employer Response, Section 1 – No enrollment possible, Item 5

Regarding Item 5 of Section 1 of the *Employer Response*, NYS OTDA recommends the insertion of a space between “the” and “plan” at the end of the sentence.

Comment 5, Page 3, Employer Response, Section 3 – Dependent Coverage Available, Item 9

Item 9 of Section 3 of the *Employer Response* references the NMSN – Part B. For purposes of consistency, NYS OTDA recommends use of the same (although incorrect) title; that is “Part B – Medical Support Notice to **the** Plan Administrator.”

Comment 6, Page 4, Notice and General Instructions to Employer, Fourth Paragraph

The fourth paragraph of the *Notice and General Instructions to Employer* section includes three references to the NMSN - Part B. For purposes of consistency, NYS recommends use of the same (although incorrect) title for all three references; that is “Part B – Medical Support Notice to **the** Plan

Sample Form - NMSN – Part A

Comment 7, Page 1, First Paragraph

For purposes of consistency within this sentence and paragraph, NYS OTDA recommends the elimination of the space between “466(a)” and “(19).”

Comment 8, Page 1, Item 1a, National Medical Support Order/Notice (NMSN)

The formatting of this sample form item varies from its formatting on the National Medical Support Notice – Part A (“actual form”). For purposes of clarity, NYS OTDA recommends the formatting be adjusted to place “(NMSN)” immediately after “National Medical Support Order/Notice.” If this is not possible, then NYS OTDA recommends aligning “NMSN” with the above “N” in “National.”

Comment 9, Page 1, Item 1b, Termination Order/Notice (Optional)

The formatting of this sample form item varies from its formatting on the actual form. For purposes of clarity, NYS OTDA suggests the formatting be revised to place “2” on the same line as “page.” If this is not possible, then NYS OTDA recommends aligning “2” with the above “T” in “Termination.”

Comment 10, Page 1, Item 3f, Child(ren)’s Mailing Address

For purposes of consistency with the formatting of the actual form, NYS OTDA recommends the elimination of the blank line in Item 3f.

Comment 11, Page 1, Item 3q, Mailing Address of a Representative of the Child(ren)

For purposes of consistency with the formatting of the actual form, NYS OTDA recommends the elimination of the blank line before the “Mailing Address of a Representative of the Child(ren)” in Item 3q.

Comment 12, Page 1, Paperwork Reduction Act of 1995 Paragraph

The Paperwork Reduction Act of 1995 paragraph extends on to page 2. For purposes of consistency with the actual form, NYS OTDA recommends the formatting be adjusted to include this entire paragraph on page 1.

Comment 13, Page 2, Priority of Withholding

The wording of the first sentence in the first paragraph of this section does not match the language found on the actual form. For purposes of consistency, NYS OTDA recommends “may have” be changed to “has” so that the sentence reads as follows: “. . . each state **has** policy or law which prioritizes the kinds of support to be paid.”

Comment 14, Page 3, Employer Response, Section 1 – No Enrollment Possible, Item 7c

The second sentence of Item 7c is indented and separated from the first sentence by a blank line. Because Item 7c pertains to both sentences, NYS OTDA recommends the second sentence be placed immediately after the first sentence.

Comment 15, Page 3, Employer Response, Section 1 – No Enrollment Possible, Item 7i

On Item 7i of Section 1 of the *Employer Response*, NYS OTDA recommends the insertion of a space between “the” and “plan” at the end of the sentence.

Comment 16, Page 3, Employer Response, Section 3 – Dependent Coverage Available, Item 7n

Item 7n of Section 3 of the *Employer Response* references the NMSN – Part B. For purposes of consistency, NYS OTDA recommends use of the same (although incorrect) title; that is “Part B – Medical Support Notice to **the** Plan Administrator.”

Comment 17, Page 4, Notice and General Instructions to Employer, Fourth Paragraph

The fourth paragraph of the *Notice and General Instructions to Employer* section includes three references to the NMSN - Part B. For purposes of consistency, NYS recommends use of the same (although incorrect) title for all three references; that is “Part B – Medical Support Notice to **the** Plan Administrator.”

Supplemental Instructions for Employers, Employer Partners, and Child Support Agencies

Comment 18, Page 2, Employer Responsibilities, Item 10

Item 10 of the *Employer Responsibilities* section includes four references to the NMSN - Part B. For purposes of consistency, NYS recommends use of the same (although incorrect) title for all four references; the reference in the first paragraph should be changed to “Part B – Medical Support Notice to **the** Plan

Comment 19, Page 3, Employer Responsibilities, Item 11

The introductory phrase of Item 11 indicates there has been notification of the child(ren)’s enrollment, but the second bullet following this phrase relates to a situation where enrollment **cannot** be completed. Therefore, NYS OTDA recommends that the introductory phrase be modified to replace “of the child(rens) enrollment” with “whether the child(ren) is/are enrolled or cannot be enrolled.”

Comment 20, Page 5, Instructions for Fields of the National Medical Support Notice – Part A, Item 2i, Order Date

The order date is described as the “**date order** which the court or agency ordered the employee to provide health care coverage for the child(ren).” For purposes of clarity, NYS OTDA recommends that “date order” be changed to “date upon.”

Comment 21, Page 8, Instructions for Fields of the National Medical Support Notice – Part A, Limitations on Withholding, Step 1 to Enrollment, The Amount of The Employee’s Gross and Disposable Earnings, Item 1)a)ii.

Item 1)a)ii., the first paragraph at the top of page 8, references the “State Medical Support Contact and Program Information” matrix. However, the actual matrix is titled “State Medical Support Contacts and Program **Requirements**.” For purposes of consistency, NYS OTDA recommends use of the correct title.

Comment 22, Page 8, Instructions for Fields of the National Medical Support Notice – Part A, Limitations on Withholding, Step 1 to Enrollment, The Amount of The Employee’s Gross and Disposable Earnings, Paragraph 1)b)iii.

Item 1)b)iii., the third paragraph under “Allowable disposable earnings,” references the “State Medical Support Contact and Program Information” matrix. For purposes of consistency, NYS OTDA recommends use of the correct title; that is “State Medical Support Contacts and Program Requirements.”

Comment 23, Page 8, Instructions for Fields of the National Medical Support Notice – Part A, Limitations on Withholding, Step 1 to Enrollment, The Amount of The Employee’s Gross and Disposable Earnings, Last Paragraph

The last paragraph of Step 1 to Enrollment, The Amount of The Employee’s Gross and Disposable Earnings, references the “State Medical Support Matrix.” For purposes of consistency, NYS OTDA recommends use of the actual title of the matrix; that is, “State Medical Support Contacts and Program Requirements.

Comment 24 Page 9, Instructions for Fields of the National Medical Support Notice – Part A, Priority of Withholding, Second Paragraph

The second paragraph at the top of page 9 references the “OCSE Medical Support Matrix.” For purposes of consistency, NYS OTDA recommends use of the correct title; that is, “State Medical Support Contacts and Program Requirements.”

Comment 25, Page 9, Instructions for Fields of the National Medical Support Notice – Part A, Employer Response, Section 1 – No enrollment possible

For purposes of consistency with the titles of the other sections of the *Employer Response*, NYS OTDA recommends capitalization of the “e” in “enrollment” and “p” in “possible” so that each word in the section title is capitalized.

Comment 26, Page 10, Instructions for Fields of the National Medical Support Notice – Part A, Item 7j, Other

The sentence immediately following Item 7j provides an instruction to “skip to Instruction #8 on page 11.” However, Instruction #8 begins on page 10. Therefore, NYS OTDA recommends “page 11” be changed to “page 10.”

Comment 27, Page 11, Instructions for Fields of the National Medical Support Notice – Part A, Item 8i, Plan Administrator Company/Union Contact Name

For purposes of consistency with related Items 8j – 8n, NYS OTDA recommends the description of Item 8i include “or Union” so that the description reads as follows: The name of the contact person for the Plan Administrator or Union to contact for questions.”

Thank you for the opportunity to comment.

Very Truly Yours,

A handwritten signature in cursive script, reading "Eileen M. Stack".

Eileen M. Stack
Deputy Commissioner
Child Support Services
NYS OTDA

cc: Tangler Gray, Commissioner
Federal Office of Child Support Enforcement