

Health Care

1. The Court finds that the following provisions of this medical support order are intended to and do comply with the priority requirements of Texas Family Code section 154.182 as follows:

2. IT IS ORDERED that OBLIGEE and OBLIGOR shall each provide medical support and health care insurance coverage for each child as set out in this order as child support for as long as the Court may order OBLIGEE and OBLIGOR to provide support for the child under sections 154.001 and 154.002 of the Texas Family Code. Beginning on the day OBLIGEE and OBLIGOR's actual or potential obligation to support a child under sections 154.001 and 154.002 of the Family Code terminates, IT IS ORDERED that OBLIGEE and OBLIGOR are discharged from the obligations set forth in this medical support order with respect to that child, except for any failure by a parent to fully comply with those obligations before that date.

3. Definitions -

"Health Insurance" means health-care insurance coverage that provides basic health (vision and dental services if included in basic health-insurance coverage available to obligee and/or obligor), including usual physician services, office visits, hospitalization, and laboratory, X-ray, and emergency services, that may be provided through a health maintenance organization or other private or public organization, other than medical assistance under chapter 32 of the Texas Human Resources Code.

"Reasonable cost" means the cost of health insurance coverage for a child, not to exceed nine percent of the responsible parent's annual resources as described by the Texas Family Code section 154.062(b).

"Reasonable and necessary health-care expenses not paid by insurance and incurred by or

on behalf of a child" include, without limitation, any copayments for office visits or prescription drugs, the yearly deductible, if any, and medical, surgical, prescription drug, mental health-care services, dental, eye care, and, if included in basic health insurance coverage available to obligee and/or obligor, ophthalmological, and orthodontic charges. These reasonable and necessary health-care expenses do not include expenses for travel to and from the health-care provider or for nonprescription medication.

"Furnish" means:

- a. to hand deliver the document by a person eighteen years or older either to the recipient or to a person who is eighteen years or older and who permanently resides with the recipient;
- b. to deliver the document to the recipient by certified mail, return receipt requested, to the recipient's last known mailing or residence address; or
- c. to deliver the document to the recipient at the recipient's last known mailing or residence address using any person or entity whose principal business is that of a courier or deliverer of papers or documents either within or outside the United States.

“Written notice” means written communication together with supporting documentation sent by mail or courier by one party to the other party through the U.S. Postal Service, United Postal Service, Federal Express or other courier service. Notice shall be presumed to have been received by the party receiving notice if it is mailed to the party’s last known address by first-class mail or certified mail/return-receipt requested through the U.S. Postal Service or delivery by United Postal Service, Federal Express or other courier service with proof of delivery.

4. Obligations of OBLIGOR - OBLIGOR is ORDERED to include and maintain each child in OBLIGOR's health insurance available through employer, union, trade association or other organization or insurer no later than 30 days after the Court signs this order. In the event that health insurance is not available to OBLIGOR through employer, union, trade association or other organization, but is available from another source, IT IS ORDERED that OBLIGOR shall

provide health insurance from said source. It is ordered that OBLIGOR shall verify coverage to OBLIGEE and the El Paso County Domestic Relations Office, 500 E. San Antonio, Rm LL-108, El Paso, Texas, 79901 (Telefax – 915/834-8299) within 45 days after the Court signs this order.

5. Obligations of OBLIGEE – In the event that OBLIGOR fails to obtain and maintain health insurance by the due date, or in the event health insurance becomes unavailable to OBLIGOR through an employer, union, trade association or other organization or insurer at a reasonable cost, IT IS ORDERED that OBLIGEE shall include the children in OBLIGEE's health insurance available through an employer, union, trade association or other organization or insurer, and shall notify OBLIGOR, in writing and within thirty (30) days of such enrollment, of the date and cost of said coverage, which notice shall include documentation from OBLIGEE's employer, union, trade association or other organization or insurer. OBLIGEE is ORDERED to provide a copy of the written notice to the El Paso County Domestic Relations Office, 500 E. San Antonio, Rm LL-108, El Paso, Texas, 79901 (Telefax – 915/834-8299).

OBLIGOR is ORDERED to pay to OBLIGEE the monthly cost of insuring the children, with the first payment due and payable on the first day of the month following the date OBLIGOR receives written notice, and a like payment on the same day each month thereafter in accordance with this order.

If and when there is any change in the cost of the health insurance coverage to the OBLIGEE, OBLIGEE is ORDERED to notify OBLIGOR of the date and cost of said changes, in writing and within thirty (30) days of said changes, which notice shall include documentation of the cost from OBLIGEE's employer, union, trade association or other organization or insurer. OBLIGEE is ORDERED to provide a copy of the written notice to the El Paso County Domestic Relations Office, 500 E. San Antonio, Rm LL-108, El Paso, Texas, 79901 (Telefax – 915/834-

8299). OBLIGOR is ORDERED to pay the modified cost with the first payment due and payable on the first day of the month following written notice, to include documentation of the modified cost, from OBLIGEE's employer, union, trade association or other organization or insurer.

OBLIGOR is further ORDERED to make all payments for reimbursement of the cost of health insurance to the Texas Child Support State Disbursement Unit, P.O. Box 659791, San Antonio, Texas 78265-9791, and to include the cause number and obligee's name on the check or money order. The payment of reimbursement required by this order will be by an order for withholding from earnings separate from any other wage withholding order required.

6. In the event that health insurance is not available to either party at a reasonable cost, and if the children are eligible for the Children's Health Insurance Program (CHIP), OBLIGEE is ORDERED to enroll the children in CHIP, no later than 30 days of the date of this order or within 30 days of the date health insurance becomes unavailable to either party, and to perform all acts thereafter to continue CHIP benefits for the children as long as the children are eligible. OBLIGEE is ordered to notify OBLIGOR of enrollment in the CHIP program within thirty (30) days of enrollment.

IT IS ORDERED that OBLIGOR shall pay cash medical support as additional child support, in the amount of \$_____ per month (an amount not to exceed 9% of Obligor's annual resources or \$113.00 for 2010 minimum wage), with the first payment being due and payable on the first day of the month following Medicaid enrollment, and a like payment being due and payable on the first day of each month thereafter so long as the children are enrolled in Medicaid.

OBLIGOR is further ORDERED to make all cash medical support payments through the Texas Child Support State Disbursement Unit, P.O. Box 659791, San Antonio, Texas 78265-

9791, and to include the cause number and obligee's name on the check or money order. The payment of cash medical support required by this order will be by an order for withholding from earnings separate from any other wage withholding order required.

7. In the event that health insurance is not available to either party at a reasonable cost, if the children are not eligible for CHIP, and if the children are eligible for Medicaid, OBLIGEE is ORDERED to enroll the children in Medicaid and to perform all acts necessary to the enrollment of the children no later than 30 days of this order or within 30 days of the date health insurance becomes unavailable to either party, and to perform all acts thereafter to continue Medicaid benefits for the children as long as the children are eligible.

IT IS ORDERED that OBLIGOR shall pay cash medical support as additional child support, in the amount of \$_____ per month (an amount not to exceed 9% of Obligor's annual resources or \$113.00 for 2010 minimum wage), with the first payment being due and payable on the first day of the month following Medicaid enrollment, and a like payment being due and payable on the first day of each month thereafter so long as the children are enrolled in Medicaid.

OBLIGOR is further ORDERED to make all cash medical support payments through the Texas Child Support State Disbursement Unit, P.O. Box 659791, San Antonio, Texas 78265-9791, and to include the cause number and obligee's name on the check or money order. The payment of cash medical support required by this order will be by an order for withholding from earnings separate from any other wage withholding order required.

7. In the event that health insurance is not available to either party at a reasonable cost, if the children are not eligible for CHIP or Medicaid, or health insurance coverage for any child is denied, OBLIGOR is ORDERED to pay cash medical support to OBLIGEE in the

amount of \$_____ (an amount not to exceed 9% of Obligor's gross annual resources) per month with the first payment due and payable on the first day of the month following the date that health insurance becomes unavailable or health insurance coverage is terminated or denied and a like payment on the first day of each month thereafter so long as child support is payable under these orders.

OBLIGOR is ordered to make all cash medical support payments through the Texas Child Support State Disbursement Unit, P.O. Box 659791, San Antonio, Texas 78265-9791, and to include the cause number and obligee's name on the check or money order. The payment of cash medical support required by this order will be by an order for withholding from earnings separate from any other wage withholding order required.

8. Obligations of the Party Providing Insurance – The party providing health insurance is ORDERED -
- a. to furnish to each conservator of the children the following information no later than the thirtieth day after the date the notice of the rendition of this order is received:
 - i. the Social Security number of the parent providing insurance;
 - ii. the name and address of the employer of the parent providing insurance;
 - iii. whether the employer is self-insured or has health insurance available;
 - iv. proof that health insurance has been provided for each child; and
 - v. 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 or, 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. to furnish to each conservator of the children a copy of any renewals or changes to the health insurance policy covering a child, or any additional information regarding health insurance coverage of the child, including any change in the actual cost of the health insurance for the child, no later than the fifteenth day after the party providing the health insurance receives or is provided with the renewal, change, or additional information;
- c. to furnish each conservator of the children with all documentation accessible to OBLIGOR of any termination or lapse of the health insurance coverage of a child no later than the fifteenth day after the date of the termination or lapse;
- d. after termination or lapse of health insurance coverage, to furnish each conservator of the children with all documentation accessible to OBLIGOR of the availability of additional health insurance for the children no later than the fifteenth day after the date the insurance becomes available;
- e. after a termination or lapse of health insurance coverage, to furnish each conservator of the children with all documentation accessible to OBLIGOR of the availability of enrollment of the children in a

government medical assistance program, government health plan, medical assistance program under chapter 32 of the Texas Human Resources Code or a state child health plan under chapter 62 of the Texas Health and Safety Code, no later than the fifteenth day after the date the enrollment in the program becomes available;

- f. to enroll the children at the next available enrollment period in a health insurance plan that is available at reasonable cost after the previous health insurance has been terminated or has lapsed; and
- g. to enroll the children in a government medical assistance program, government health plan, medical assistance program under chapter 32 of the Texas Human Resources Code or a state child health plan under chapter 62 of the Texas Health and Safety Code if the children are eligible for enrollment in the program and no health insurance plan is available at reasonable cost.

The party providing health insurance coverage for the children is further ORDERED to provide verification of coverage required herein to the Domestic Relations Office, Room L108, El Paso County Courthouse, 500 E. San Antonio, El Paso, Texas, 79901, within thirty (30) days of the date of this order, and on the month each year thereafter, as long as the provision of health insurance is required under this order.

9. Secondary Coverage - IT IS ORDERED that nothing in this order shall prevent either party from providing secondary health insurance coverage for the children at that party's sole cost and expense. IT IS FURTHER ORDERED that if a party provides secondary health insurance coverage for the children, both parties shall cooperate fully with regard to the handling

and filing of claims with the insurance carrier providing the coverage in order to maximize the benefits available to the children and to ensure that the party who pays for health-care expenses for the children is reimbursed for the payment from both carriers to the fullest extent possible.

10. Compliance with Insurance Company Requirements - Each party is ORDERED to conform to all requirements imposed by the terms and conditions of the policy of health insurance covering the children in order to assure maximum reimbursement or direct payment by the insurance company of the incurred health-care expense, including but not limited to requirements for advance notice to carrier, second opinions, and the like. Each party is ORDERED to attempt to use "preferred providers," or services within the health maintenance organization, if applicable; however, this provision shall not apply if emergency care is required. Disallowance of the bill by a health insurer shall not excuse the obligation of either party to make payment; however, if a bill is disallowed or the benefit reduced because of the failure of a party to follow procedures or requirements of the carrier, IT IS ORDERED that the party failing to follow the carrier's procedures or requirements shall be wholly responsible for the increased portion of that bill.

11. Claims - Except as provided in this paragraph, the party who is not carrying the health insurance policy covering the children is ORDERED to furnish to the party carrying the policy, within fifteen days of receiving them, any and all forms, receipts, bills, and statements reflecting the health-care expenses the party not carrying the policy incurs on behalf of the children. In accordance with section 1204.251 of the Texas Insurance Code, IT IS ORDERED that the party who is not carrying the health insurance policy covering the children may, at that party's option, file directly with the insurance carrier with whom coverage is provided for the benefit of the children any claims for health-care expenses, including but not limited to medical,

hospitalization, and dental costs, and receive payments directly from the insurance company.

The party who is carrying the health insurance policy covering the children is ORDERED to submit all forms required by the insurance company for payment or reimbursement of health-care expenses incurred by either party on behalf of a child to the insurance carrier within fifteen days of that party's receiving any form, receipt, bill, or statement reflecting the expenses.

12. Constructive Trust for Payments Received - IT IS ORDERED that any insurance payments received by a party from the health insurance carrier as reimbursement for health-care expenses incurred by or on behalf of a child shall belong to the party who incurred and paid those expenses. IT IS FURTHER ORDERED that the party receiving the insurance payments is designated a constructive trustee to receive any insurance checks or payments for health-care expenses incurred and paid by the other party, and the party carrying the policy shall endorse and forward the checks or payments, along with any explanation of benefits received, to the other party within three days of receiving them.

13. Reimbursement of Health-Care Expenses Not Paid by Insurance or Cash Medical Support- Subject to the provisions in paragraph 9 immediately above, IT IS ORDERED that, if health-care expenses are incurred for a child, OBLIGEE and OBLIGOR shall pay all reasonable and necessary health-care expenses not paid by insurance or covered by the amount of cash medical support ordered and incurred by or on behalf of the child in the following portions:

- a. If the health-care expenses are incurred by using a HMO or PPO plan, in an emergency, or with the written agreement of the other party, OBLIGEE is ORDERED to pay _____ percent and OBLIGOR is ORDERED to pay _____percent.

- b. Except in an emergency or if the other parent agreed in writing, if a party incurs health-care expenses for the child by using the services of health-care providers not employed by the HMO or approved by the PPO, the party incurring the services is ORDERED to pay 100 percent and the other party is ORDERED to pay 0 percent.
- c. If OBLIGOR provides health insurance for the child through an HMO or a PPO that does not provide coverage for the child where the child resides or have network providers in the area where the child resides, OBLIGEE is ORDERED to pay _____ percent and OBLIGOR is ORDERED to pay _____ percent.
- d. If the child is enrolled in a health-care plan that is not an HMO or a PPO, OBLIGEE is ORDERED to pay _____ percent and OBLIGOR is ORDERED to pay _____ percent.
- e. If the child was enrolled in a government medical assistance program, government health plan, medical assistance program under chapter 32 of the Texas Human Resources Code or a state child health plan under chapter 62 of the Texas Health and Safety Code and is no longer eligible for coverage in that plan or program, OBLIGEE is ORDERED to pay _____ percent and OBLIGOR is ORDERED to pay _____ percent until health insurance is provided for the child or the child is again eligible for enrollment in a government medical assistance program, government health plan, medical assistance program under chapter 32 of the Texas Human Resources Code or a state child health plan under chapter 62 of the

Texas Health and Safety Code.

- f. If health care coverage is provided for the child in the form of cash medical support, OBLIGEE is ORDERED to pay _____ percent and OBLIGOR is ORDERED to pay _____ percent.

Reimbursement to OBLIGEE by OBLIGOR

IT IS ORDERED that if OBLIGEE pays for a health-care expense not covered by health insurance on behalf of the child, OBLIGEE shall furnish to OBLIGOR, **on a monthly basis and within thirty (30) days** of receiving them, all forms, receipts, bills, and explanations of benefits paid reflecting the uninsured portion of the health-care expenses OBLIGEE incurs on behalf of the child.

IT IS FURTHER ORDERED that if OBLIGEE furnishes all of these forms, receipts, bills, and explanations of benefits to OBLIGOR within thirty days of receiving them, OBLIGOR shall pay his or her share of the uninsured portion of the health-care expenses either by paying the health-care provider directly or by reimbursing OBLIGEE through the registry maintained by the EL PASO COUNTY DOMESTIC RELATIONS OFFICE, 500 E. SAN ANTONIO, ROOM LL108, EL PASO, TEXAS, 79901 for any payment exceeding OBLIGEE's share of the expenses no later than **thirty (30) days** after OBLIGOR receives the following documentation relating to the health-care expense:

- a. a receipt for a prescription reflecting the child's name,
- b. a receipt for a copayment for health-care services provided to the child and reflecting the child's name,
- c. a receipt for health-care expenses provided to the child of a type not covered by the health insurance plan which reflects the child's name, or
- d. an explanation of benefits stating the benefits paid for all other health-care expenses which identifies the child.

If OBLIGEE does not furnish to OBLIGOR all of the forms, receipts, bills, and

explanations of benefits paid reflecting the uninsured portion of a health-care expense incurred on behalf of the child within thirty days of receiving these documents, IT IS ORDERED that the OBLIGOR shall pay his or her share of the uninsured portion of the health-care expense either by paying the health-care provider directly or by reimbursing OBLIGEE through the registry retained by the EL PASO COUNTY DOMESTIC RELATIONS OFFICE, 500 E. SAN ANTONIO, ROOM LL108, EL PASO, TEXAS, 79901 for any payment exceeding OBLIGEE's share of the expense no later than **120 days** after OBLIGOR receives the documentation listed above in this section relating to the health-care expense.

Reimbursement to OBLIGOR by OBLIGEE

IT IS ORDERED that if OBLIGOR pays for a health-care expense not covered by health insurance on behalf of the child, OBLIGOR shall furnish to OBLIGEE, **on a monthly basis and within thirty (30) days** of receiving them, all forms, receipts, bills, and explanations of benefits paid reflecting the uninsured portion of the health-care expenses the paying party incurs on behalf of the child.

IT IS FURTHER ORDERED that if OBLIGOR furnishes all of these forms, receipts, bills, and explanations of benefits to OBLIGEE within thirty days of receiving them, OBLIGEE shall pay his or her share of the uninsured portion of the health-care expenses either by paying the health-care provider directly or by reimbursing OBLIGOR through the registry maintained by the EL PASO COUNTY DOMESTIC RELATIONS OFFICE, 500 E. SAN ANTONIO, ROOM LL108, EL PASO, TEXAS, 79901 for any payment exceeding OBLIGOR's share of the expenses no later than **thirty (30) days** after OBLIGEE receives the following documentation relating to the health-care expense:

- a. a receipt for a prescription reflecting the child's name,
- b. a receipt for a copayment for health-care services provided to the child

- c. and reflecting the child's name,
- c. a receipt for health-care expenses provided to the child of a type not covered by the health insurance plan which reflects the child's name, or
- d. an explanation of benefits stating the benefits paid for all other health-care expenses which identifies the child.

If OBLIGOR does not furnish to OBLIGEE all of the forms, receipts, bills, and explanations of benefits paid reflecting the uninsured portion of a health-care expense incurred on behalf of the child within thirty days of receiving these documents, IT IS ORDERED that the OBLIGEE shall pay his or her share of the uninsured portion of the health-care expense either by paying the health-care provider directly or by reimbursing OBLIGOR through the registry retained by the EL PASO COUNTY DOMESTIC RELATIONS OFFICE, 500 E. SAN ANTONIO, ROOM LL108, EL PASO, TEXAS, 79901 for any payment exceeding OBLIGOR's share of the expense no later than **120 days** after OBLIGEE receives the documentation listed above in this section relating to the health-care expense.

Form and Manner of Notification

IT IS ORDERED that the form of said notice of health-care expense reimbursement shall be as follows:

- a. Copies of:
 - 1) a receipt for a prescription reflecting the child's name,
 - 2) a receipt for a copayment for health-care services provided to the child and reflecting the child's name,
 - 3) a receipt for health-care expenses provided to the child of a type not covered by the health insurance plan which reflects the child's name, or
 - 4) an explanation of benefits stating the benefits paid for all other health-care expenses which identifies the child;and
- b. An itemization of all health-care expenses for the 30-day period for which receipts are submitted, reflecting the patient's name, date of service, service provider, total amount of unreimbursed health-care expenses and amount due (log attached hereto as Exhibit A); and

- c. Cover letter showing the date of notice, address of party from whom payment is requested and the amount of payment due (sample letter attached hereto as Exhibit B).

IT IS ORDERED that requests for reimbursement of uninsured health-care expenses shall be made by the party requesting reimbursement to the party responsible for reimbursement at his or her last known address, which is currently:

OBLIGEE
ADDRESS
CITY, STATE, ZIP CODE
PHONE NUMBER

OBLIGOR
ADDRESS
CITY, STATE, ZIP CODE
PHONE NUMBER

IT IS FURTHER ORDERED that the party responsible for reimbursement of uninsured health-care expenses shall submit a copy of the cover letter requesting payment with such payment to the EL PASO COUNTY DOMESTIC RELATIONS OFFICE, 500 E. SAN ANTONIO, RM LL-108, EL PASO, TEXAS 79901, and shall make the instrument of payment (personal check, money order, or cashier's check) payable to the party requesting reimbursement, the cause number (CAUSE NO.), and the notation that said payment is for reimbursement of medical expenses.

IT IS ORDERED that reasonableness of the charges for health-care expenses shall be presumed when a party is furnished with the applicable documents for the charges and that disallowance of the bill by a health insurer shall not excuse that party's obligation to make payment or reimbursement as otherwise provided herein.

14. WARNING - 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 NECESSARY MEDICAL EXPENSES OF THE CHILDREN, WITHOUT REGARD TO WHETHER THE EXPENSES

WOULD HAVE BEEN PAID IF HEALTH INSURANCE HAD BEEN PROVIDED, AND FOR THE COST OF HEALTH INSURANCE PREMIUMS OR CONTRIBUTIONS, IF ANY, PAID ON BEHALF OF THE CHILDREN.

Medical Notification

Each party is ORDERED to inform the other party within twenty-four (24) hours of any medical condition of the children requiring surgical intervention, hospitalization, or both.

Required Notices

EACH PERSON WHO IS A PARTY TO THIS ORDER IS ORDERED TO NOTIFY EACH OTHER PARTY, THE COURT, AND THE STATE CASE REGISTRY OF ANY CHANGE IN THE PARTY'S CURRENT RESIDENCE ADDRESS, MAILING ADDRESS, HOME TELEPHONE NUMBER, NAME OF EMPLOYER, ADDRESS OF EMPLOYMENT, DRIVER'S LICENSE NUMBER, AND WORK TELEPHONE NUMBER. THE PARTY IS ORDERED TO GIVE NOTICE OF AN INTENDED CHANGE IN ANY OF THE REQUIRED INFORMATION TO EACH OTHER PARTY, THE COURT, AND THE STATE CASE REGISTRY ON OR BEFORE THE 60TH DAY BEFORE THE INTENDED CHANGE. IF THE PARTY DOES NOT KNOW OR COULD NOT HAVE KNOWN OF THE CHANGE IN SUFFICIENT TIME TO PROVIDE 60-DAY NOTICE, THE PARTY IS ORDERED TO GIVE NOTICE OF THE CHANGE ON OR BEFORE THE FIFTH DAY AFTER THE DATE THAT THE PARTY KNOWS OF THE CHANGE.

THE DUTY TO FURNISH THIS INFORMATION TO EACH OTHER PARTY, THE COURT, AND THE STATE CASE REGISTRY CONTINUES AS LONG AS ANY PERSON, BY VIRTUE OF THIS ORDER, IS UNDER AN OBLIGATION TO PAY CHILD SUPPORT OR ENTITLED TO POSSESSION OF OR ACCESS TO A CHILD.

FAILURE BY A PARTY TO OBEY THE ORDER OF THIS COURT TO PROVIDE EACH OTHER PARTY, THE COURT, AND THE STATE CASE REGISTRY WITH THE CHANGE IN THE REQUIRED INFORMATION MAY RESULT IN FURTHER LITIGATION TO ENFORCE THE ORDER, INCLUDING CONTEMPT OF COURT. A FINDING OF CONTEMPT MAY BE PUNISHED BY CONFINEMENT IN JAIL FOR UP TO SIX MONTHS, A FINE OF UP TO \$500 FOR EACH VIOLATION, AND A MONEY JUDGMENT FOR PAYMENT OF ATTORNEY'S FEES AND COURT COSTS.

Notice shall be given to the other party by delivering a copy of the notice to the party by registered or certified mail, return receipt requested. Notice shall be given to the Court by delivering a copy of the notice either in person to the clerk of this Court or by registered or certified mail addressed to the clerk. Notice shall be given to the state case registry by mailing a copy of the notice to State Case Registry, Contract Services Section, MC046S, P.O. Box 12017, Austin, Texas 78711-2017. Notice shall be given to the Domestic Relations office by mailing a copy of the notice to the El Paso County Domestic Relations Office, 500 E. San Antonio, Rm. LL-108, El Paso, Texas 79901.

Warnings

WARNINGS TO PARTIES: FAILURE TO OBEY A COURT ORDER FOR CHILD SUPPORT OR FOR POSSESSION OF OR ACCESS TO A CHILD MAY RESULT IN FURTHER LITIGATION TO ENFORCE THE ORDER, INCLUDING CONTEMPT OF COURT. A FINDING OF CONTEMPT MAY BE PUNISHED BY CONFINEMENT IN JAIL FOR UP TO SIX MONTHS, A FINE OF UP TO \$500 FOR EACH VIOLATION, AND A MONEY JUDGMENT FOR PAYMENT OF ATTORNEY'S FEES AND COURT COSTS.

FAILURE OF A PARTY TO MAKE A CHILD SUPPORT PAYMENT TO THE

PLACE AND IN THE MANNER REQUIRED BY A COURT ORDER MAY RESULT IN THE PARTY'S NOT RECEIVING CREDIT FOR MAKING THE PAYMENT.

FAILURE OF A PARTY TO PAY CHILD SUPPORT DOES NOT JUSTIFY DENYING THAT PARTY COURT-ORDERED POSSESSION OF OR ACCESS TO A CHILD. REFUSAL BY A PARTY TO ALLOW POSSESSION OF OR ACCESS TO A CHILD DOES NOT JUSTIFY FAILURE TO PAY COURT-ORDERED CHILD SUPPORT TO THAT PARTY.

Relief Not Granted

IT IS ORDERED that all relief requested in this case and not expressly granted is denied. All other terms of the prior orders not specifically modified in this order shall remain in full force and effect.