2026 Regular Session

HOUSE BILL NO. 943

BY REPRESENTATIVE FIRMENT

CHILDREN/SUPPORT: Directs insurers to conduct data matches and withhold certain insurance and settlement payments to satisfy child support obligations

1   AN ACT

2   To enact R.S. 46:236.1.13 and R.S. 22:2472, relative to child support enforcement and

3   insurer compliance; to require insurers to conduct data matches prior to issuing

4   qualifying payments; to provide for withholding and remittance of certain payments;

5   to provide for enforcement by the commissioner of insurance; to provide for

6   rulemaking; to provide for an effective date; and to provide for related matters.

7   Be it enacted by the Legislature of Louisiana:

8   Section 1. R.S.22:2472 is hereby enacted to read as follows:

9   §2472. Child support insurance intercept; insurer compliance; enforcement

10   A.   Every insurer doing business in this state shall comply with the

11   requirements of R.S. 46:236.1.13, including the obligation to conduct data matches

12   and to withhold and remit qualifying payments when notified by the Department of

13   Children and Family Services.

14   B. The commissioner of insurance shall have full enforcement authority over

15   insurer compliance with R.S. 46:236.1.13, including the authority to:

16   (1) Issue cease and desist orders.

17   (2) Impose administrative fines pursuant to R.S. 22:2.

18   (3) Conduct examinations and investigations.

19   (4) Adopt rules and regulations necessary to implement this Section.

1   C. Failure to comply with R.S. 46:236.1.13 shall constitute an unfair or

2   deceptive act or practice under R.S. 22:1964.

3   Section 2. R.S. 46:236.1.13 is hereby enacted to read as follows:

4   §236.1.13. Family and child support programs; insurance data matching and

5   cooperation; responsibilities

6   A.(1) Each insurer shall, no later than five days prior to issuing a qualifying

7   payment, exchange information with the office of child support in the manner

8   prescribed by the department to verify whether a recipient owes debt for the support

9   of one or more children to the department or to a person receiving services from the

10   office of child support.

11   (2) To the extent feasible, the office of child support shall facilitate a secure

12   electronic process to exchange information with insurers pursuant to this Section.

13   The obligation of an insurer to exchange information with the office of child support

14   is discharged upon complying with the requirements of this Section.

15   (3) The exchange of information shall comply with privacy protections under

16   applicable state and federal laws and regulations, including the federal Health

17   Insurance Portability and Accountability Act.

18   B. In order to determine whether a recipient of funds owes a debt being

19   enforced by the office of child support, all insurers doing business in the state that

20   issue qualifying payments to a recipient shall provide minimum identifying

21   information about the recipient to:

22   (1) An insurance claim data collection organization;

23   (2) The federal office of child support enforcement or the child support lien

24   network; or

25   (3) The office of child support enforcement directly in a manner satisfactory

26   to the department.

27   C. If an insurer is notified by the office of child support enforcement that a

28   recipient owes debt for the support of one or more children to the department or to

29   a person receiving services from the office of child support enforcement, the insurer

1   shall, upon the receipt of a notice issued by the department identifying the amount

2   of debt owed:

3   (1)   Withhold from payment to the recipient the amount specified in the

4   notice; and

5   (2)   Remit the amount withheld from payment to the department within

6   twenty days.

7   D.   The department shall give priority over any withholding of payment

8   pursuant to Subsection C of this Section to any lien, claim, or demand for reasonable

9   claim-related attorneys' fees, litigation expenses, any portion of a claim based on

10   damage or a loss of real or personal property, documented unpaid expenses incurred

11   for medical treatment causally related to the claim, and any money assigned or

12   designated as funeral or burial expenses.

13   E.(1)   The department shall consider any information received from an

14   insurer as confidential.   Such information shall be used or disclosed by the

15   department only for the purpose of collecting past-due child support or for the

16   purpose of carrying out the provisions of this Section.

17   (2)   Information provided by the department may not be used by the insurer

18   or its agent for any purpose other than conducting the data match, and may not be

19   disclosed to any person except to the extent necessary to conduct the data match.

20   The insurer or its agent shall destroy or erase all information provided to the insurer

21   after completion of a data match.   This Subsection does not apply to data contained

22   in a child support lien or other encumbering instrument received from the department

23   after the data match process.

24   (3)   An insurer or other entity described in Subsection B of this Section may

25   not be held liable in any civil or criminal action for any act made in good faith

26   pursuant to this Section including, but not limited to:

27   (a)   Any disclosure of information to the department or the division of child

28   support; or

1   (b) The withholding of any money from payment to a recipient or the

2   remittance of such money to the department.

3   F. An insurer shall not delay the disbursement of a payment to a recipient to

4   comply with this Section. An insurer is not required to comply with Subsection C

5   of this Section if the notice issued by the department is received by the insurer after

6   the payment has disbursed. In the case of periodic payments, an insurer is not

7   required to comply with Subsection C of this Section with regard to any payments

8   disbursed before receipt of the notice, but shall comply with Subsection C of this

9   Section with regard to any payments scheduled after receipt of the notice.

10   G. If periodic payments will be made to a recipient, the insurer shall conduct

11   the exchange of information pursuant to Subsection A of this Section no later than

12   five days prior to each qualifying payment.

13   H. For the purposes of this Section, the following definitions apply:

14   (1) "Recipient" means any person who:

15   (a) Brings a tort liability claim for bodily injury or wrongful death;

16   (b) Is receiving an annuity;

17   (c) Is receiving disability insurance benefits;

18   (d) Is receiving workers' compensation benefits; or

19   (e) Is a beneficiary under a life insurance policy.

20   (2) "Claim for bodily injury" does not include a claim for uninsured or

21   underinsured vehicle coverage or medical payments coverage under a motor vehicle

22   liability policy.

23   (3) "Insurance claim data collection organization" means an organization that

24   maintains a centralized database of information concerning insurance claims to assist

25   insurers that subscribe to the database in processing claims and detecting and

26   preventing fraud, and also cooperates and coordinates with the federal or state child

27   support entities to share relevant information for insurance intercept purposes.

28   (4) "Insurer" means:

1   (a) A domestic, foreign, or alien insurance company which provides

2 insurance of any kind, including but not limited to:

3   (i) life insurance.

4   (ii) health insurance.

5   (iii) liability insurance for an occurrence.

6   (iv) an annuity.

7   (v) Any combination of subparagraphs (i)-(iv) of this Paragraph.

8   (b) A Lloyd's plan.

9   (c) A reciprocal or interinsurance exchange.

10   (d) A fraternal benefit society.

11   (e) A mutual aid association, including a mutual insurance company.

12   (f) A surplus lines insurer.

13   (g) A certified self-insurer granted a certificate of authority as authorized by

14 R.S. 23:1195 et seq.

15   (h) A governmental entity that self-insures, either individually or collectively

16 under an interlocal cooperation contract as authorized by R.S. 33:3061 et seq.

17   (5) "Qualifying payment" means a payment that is either a one-time lump

18 sum or an installment payment issued by an insurer doing business in the state,

19 which is made for the purpose of satisfying, compromising, or settling a tort or

20 insurance claim where the payment is in excess of $500 and is intended to go directly

21 to the recipient and not to a third party, such as a health care provider. It includes

22 any payment scheduled to be issued within five days of the data match required by

23 Subsection A.

24   (6) "Tort or insurance claim" means: (a) A claim for general damages, which

25 are also called noneconomic damages; or (b) a claim for lost wages. "Tort or

26 insurance claim" does not include claims for property damage under either liability

27 insurance or uninsured motorist insurance.

1   Section 3. This Act shall be known and may be cited as the Child Support Insurance

2 Intercept Act.

3   Section 4. This Act shall become effective on January 1, 2027.

DIGEST

The digest printed below was prepared by House Legislative Services. It constitutes no part of the legislative instrument. The keyword, one-liner, abstract, and digest do not constitute part of the law or proof or indicia of legislative intent. [R.S. 1:13(B) and 24:177(E)]

HB 943 Original   2026 Regular Session   Firment

Abstract: Requires insurers to conduct data matches with the Dept. of Children and Family Services (DCFS) before issuing qualifying payments and to withhold and remit any amounts owed for child support obligations. Provides for the confidentiality of data. Establishes the priority of certain liens and expenses. Sets rules regarding periodic payments. Establishes the authority for insurer compliance and enforcement within the Department of Insurance (LDI).

Proposed law requires an insurer, no later than five days prior to issuing a qualifying payment, to exchange information with the office of child support enforcement within the DCFS to determine whether the recipient owes child support debt. Requires the exchange of information to comply with applicable state and federal privacy laws.

Proposed law requires insurers issuing qualifying payments to provide minimum identifying information to an insurance claim data collection organization, the federal office of child support enforcement, child support lien network, or directly to DCFS.

Proposed law requires an insurer, upon receipt of notice from DCFS identifying the amount of child support debt owed, to withhold that amount from payment to the recipient and remit the withheld amount to DCFS within twenty days. Requires DCFS to give priority to certain liens, claims, and documented expenses before any withholding for child support.

Proposed law establishes confidentiality requirements for information exchanged between insurers and DCFS and prohibits use or disclosure of such information except as necessary to conduct the data match. Provides immunity from civil and criminal liability for insurers acting in good faith under the Section.

Proposed law prohibits insurers from delaying disbursement of payments to comply with the Section and provides that insurers are not required to withhold payments already disbursed before receipt of notice. Provides rules for periodic payments, including that insurers must conduct the required data match no later than five days prior to each qualifying payment.

Proposed law defines "recipient," "insurance claim data collection organization," "insurer," "qualifying payment," and "tort or insurance claim".

Proposed law enacts R.S. 22:2472 to require insurer compliance with R.S. 46:236.1.13 and grants LDI enforcement authority, including the ability to issue cease and desist orders, impose administrative fines, conduct examinations and investigations, and adopt rules. Provides that failure to comply constitutes an unfair or deceptive act or practice.

Effective January 1, 2027.

(Adds R.S. 46:236.1.13 and R.S. 22:2472)

CODING: Words in ~~struck through~~ type are deletions from existing law; words underscored are additions.