

House Bill 1224

By: Representative Bordeaux of the 151st

A BILL TO BE ENTITLED
AN ACT

1 To provide for changes in laws pertaining to child support enforcement and to amend Title
2 19 of the Official Code of Georgia Annotated, relating to domestic relations, so as to provide
3 for the trier of fact to vary the final sum certain monetary award of child support upon a
4 written finding that special circumstances make the presumptive amount of support excessive
5 or inadequate; to authorize the use of the National Medical Support Notice to enforce
6 medical support provisions of a child support order; to prohibit a payor from deducting a fee
7 for complying with an order for enrollment in a health benefit plan; to provide for payment
8 for a genetic test to establish paternity; to provide for the notification of employers and health
9 insurers of an order to enforce accident and sickness coverage; to provide the obligor with
10 the right and means to contest withholding of insurance premiums; to authorize the
11 Department of Human Resources to adopt rules and regulations; to provide for notice of
12 enrollment in a plan and establishment of coverage for accident and sickness insurance in
13 compliance with a child support order; to provide for notice of termination of employment
14 to the person or entity that sent a National Medical Support Notice; to change a
15 cross-reference; to establish the Department of Human Resources Bank Match Registry; to
16 vest the Department of Human Resources with the authority for the operation and
17 administration of the bank match registry; to provide for related matters; to repeal conflicting
18 laws; and for other purposes.

19 **BE IT ENACTED BY THE GENERAL ASSEMBLY OF GEORGIA:**

20 **SECTION 1.**

21 Title 19 of the Official Code of Georgia Annotated, relating to domestic relations, is
22 amended by striking the introductory language to subsection (c) of Code Section 19-6-15,
23 relating to child support in a final verdict or decree, computation of an award, guidelines for
24 determining the amount of an award, continuation of the duty to provide support, and the
25 duration of support, and inserting in its place the following:

1 "(c) The trier of fact shall vary the final sum certain monetary award of child support, up
 2 or down, from the range enumerated in paragraph (5) of subsection (b) of this Code section
 3 upon a written finding that the presence of one or more of the following special
 4 circumstances makes the presumptive amount of support either excessive or inadequate:".

5 SECTION 2.

6 Said title is further amended in Code Section 19-6-31, relating to definitions, by adding
 7 between paragraphs (8) and (9) a new paragraph (8.1) to read as follows:

8 "(8.1) 'National Medical Support Notice' means a notice as prescribed under 42 U.S.C.
 9 Section 666(a)(19), or a substantially similar notice, which is issued and forwarded by
 10 the IV-D agency to enforce the medical support provisions of a support order."

11 SECTION 3.

12 Said title is further amended by striking paragraph (2) of subsection (a) of Code Section
 13 19-6-32, relating to entering income deduction order for award of child support, when order
 14 effective, and hearing on order, and inserting in its place the following:

15 "(2) For all child support orders, and spousal support orders enforced pursuant to
 16 subsection (d) of Code Section 19-11-6, the IV-D agency shall be authorized to issue an
 17 order for income deduction without need for any amendment to the order involved or any
 18 further action by the court or entity that issued it, provided that an opportunity for a
 19 hearing before a court, a referee of the court, or an administrative law judge is afforded.
 20 The IV-D agency shall also be authorized to issue a National Medical Support Notice to
 21 enforce the medical support provisions of such orders, provided that an opportunity for
 22 a hearing pursuant to Code Section 19-11-27 is afforded. Such ~~order~~ orders or notices
 23 may be issued electronically by the IV-D agency. The IV-D agency shall issue an order
 24 for income deduction or, when appropriate, a National Support Medical Notice within
 25 two business days after the information regarding a newly hired employee is entered into
 26 the centralized employee registry pursuant to Code Section 19-11-9.2 and matched with
 27 an obligor in a case being enforced by the IV-D agency."

28 SECTION 4.

29 Said title is further amended by striking paragraph (5) of subsection (e) of Code Section
 30 19-6-33, relating to notice and service of income deduction order, hearing on enforcement
 31 of order, discharge of obligor, and penalties, and inserting in its place the following:

32 "(5) Provide that the payor may collect up to \$25.00 against the obligor's income to
 33 reimburse the payor for administrative costs for the first income deduction pursuant to
 34 an income deduction order and up to \$3.00 for each deduction thereafter. The payor of

1 income may not deduct a fee for complying with any order or notice for enrollment in a
 2 health benefit plan;".

3 SECTION 5.

4 Said title is further amended by striking subsection (f) of Code Section 19-7-43, relating to
 5 a petition, by whom brought, the effect of agreement on the right to bring a petition, a stay
 6 pending the birth of a child, a court order for blood tests, and genetic tests, and inserting in
 7 its place the following:

8 "(f) In any case in which the court or the department orders genetic testing and one or both
 9 of the parties to the action is receiving child support services pursuant to Code Section
 10 19-11-6, the department shall pay the costs of such tests subject to recoupment from the
 11 alleged father if paternity is established. A second genetic test shall be ordered by the
 12 department if an order for paternity has not been issued and if the person making the
 13 request tenders payment of the cost of the test at the time of the request."

14 SECTION 6.

15 Said title is further amended by striking Code Section 19-11-27, relating to accident and
 16 sickness insurance coverage for children, notice of enrollment provided to person or entity
 17 providing access to coverage on behalf of obligor, and establishment of coverage, and
 18 inserting in its place the following:

19 "19-11-27.

20 (a) Whenever a support obligor who is required to maintain accident and sickness
 21 insurance fails to provide such coverage as ordered, or allows such coverage to lapse, the
 22 department, the Department of Community Health, or the other party may compel the
 23 obligor to obtain insurance coverage as provided in this Code section. The remedies
 24 provided in this Code section shall be in addition to and not in lieu of any other remedies
 25 available to the department, the Department of Community Health, or the other party.

26 (b) The National Medical Support Notice as prescribed under 42 U.S.C. Section
 27 666(a)(19) shall be issued, when appropriate, by the IV-D agency to notify employers and
 28 health insurers of an order entered or being enforced by the IV-D agency pursuant to Code
 29 Section 19-11-8 and to enforce the accident and sickness provisions of such order. The
 30 IV-D agency is not required to issue the National Medical Support Notice in cases where
 31 the court or administrative order stipulates alternative accident and sickness coverage that
 32 is not employer based.

33 ~~(b)~~(c) Upon failure of a support obligor to obtain accident and sickness insurance coverage
 34 as ordered, or upon the lapse of coverage required to be provided, the department, the
 35 Department of Community Health, or the other party may issue and send a notice of

1 enrollment or National Medical Support Notice by certified mail or statutory overnight
2 delivery, return receipt requested, to the person or entity providing access to such coverage
3 on behalf of the obligor. The notice shall include a certified copy of the latest order
4 requiring health insurance coverage and the return address of the sender. ~~Upon receipt of~~
5 ~~a notice of enrollment, any person or entity providing access to accident or sickness~~
6 ~~insurance coverage on behalf of the obligor shall immediately undertake to provide such~~
7 ~~coverage as specified in the notice of enrollment. Any person or entity providing access~~
8 ~~to accident or sickness insurance coverage on behalf of the obligor shall be deemed~~
9 ~~authorized to execute any document for the obligor in order to establish coverage. If more~~
10 ~~than one insurance plan is available, coverage shall be established under the obligor's~~
11 ~~existing plan or a previously existing plan where possible. If coverage under the obligor's~~
12 ~~existing plan or a previously existing plan cannot be established, the person or entity~~
13 ~~providing access to accident and sickness insurance coverage on behalf of the obligor shall~~
14 ~~establish coverage under the least expensive plan otherwise available.~~

15 (d) In all IV-D cases, the IV-D agency shall notify the obligor in writing that the National
16 Medical Support Notice has been sent to the obligor's employer or union, and the written
17 notification shall include the obligor's rights and duties under the National Medical
18 Support Notice. The obligor has the right to contest the withholding required by the
19 National Medical Support Notice based on a mistake of fact. To contest, the obligor must
20 file a written notice of contest with the IV-D agency within 15 business days from the date
21 of the National Medical Support Notice. Filing with the IV-D agency shall be deemed
22 complete when the notice is received by the person designated by the IV-D agency in the
23 written notification. Upon the timely filing of a notice of contest, the IV-D agency shall,
24 within five business days, schedule an informal conference with the obligor to discuss the
25 obligor's factual dispute. If the informal conference resolves the dispute to the obligor's
26 satisfaction, or if the obligor fails to attend the informal conference, the notice of contest
27 shall be deemed withdrawn. If the informal conference does not resolve the dispute, the
28 obligor has the right to request an administrative hearing before an administrative law
29 judge pursuant to Chapter 13 of Title 50, the 'Georgia Administrative Procedure Act,'
30 within five business days after being notified of the results of the review by the IV-D
31 agency. However, neither a request for informal review nor the filing of a notice of contest
32 for an administrative hearing by the obligor shall delay the withholding of premium
33 payments by the union, employer, or health plan administrator. The union, employer, or
34 health plan administrator must implement the withholding as directed by the National
35 Medical Support Notice unless notified by the IV-D agency, court, or the Office of
36 Administrative Hearings that the National Medical Support Notice is terminated.

1 ~~(e)~~(e) Any person or entity providing access to accident and sickness insurance coverage
 2 on behalf of the obligor pursuant to a notice of enrollment or National Medical Support
 3 Notice shall withhold from the obligor's income the amount necessary to pay the premium
 4 for the insurance coverage, provided that the amount deducted does not exceed the
 5 limitations of Section 303(b) of the federal Consumer Credit Protection Act, as amended.

6 (f) The department is authorized to adopt rules and regulations to implement the child
 7 support enforcement provisions of this Code section that affect IV-D cases.

8 ~~(d)~~(g) Upon receipt of a notice of enrollment, ~~the person or entity providing access to~~
 9 ~~accident and sickness insurance coverage on behalf of the obligor shall notify the person~~
 10 ~~or entity sending the notice of enrollment within 30 business days whether~~ or National
 11 Medical Support Notice:

12 ~~(1) Enrollment in an accident and sickness insurance plan has occurred; or~~

13 ~~(2) Enrollment cannot be established, stating the reasons why coverage is not available.~~

14 (1) The employer and plan administrator shall comply with the provisions in the notice;

15 (2) The employer and plan administrator shall treat the notice as an application for health
 16 coverage for the dependent by the person or entity sending the notice to the extent such
 17 application is required by the plan;

18 (3) If the obligor named in the notice is not an employee of the employer or if a health
 19 benefit plan is not offered or available to the employee, the employer shall notify the
 20 person or entity sending the notice, as provided in the notice, within 20 business days
 21 after the date of the notice;

22 (4) If a health benefit plan is offered or available to the employee, the employer shall
 23 send the plan administrator's portion of the notice to each appropriate plan administrator
 24 within 20 business days after the date of the notice;

25 (5) Upon notification from the plan administrator that the dependent is enrolled, the
 26 employer shall either withhold and transfer the premiums to the plan, or notify the person
 27 or entity sending the notice, that enrollment cannot be completed because of prioritization
 28 or limits on withholding as provided in subsection (e) of this Code section or as provided
 29 in the notice;

30 (6) Upon notification from the plan administrator that the obligor is subject to a waiting
 31 period that expires more than 90 days from the date of receipt of the notice by the plan
 32 administrator, or whose duration is determined by a measure other than the passage of
 33 time, the employer shall notify the plan administrator when the obligor is eligible to
 34 enroll in the plan and that this notice requires enrollment of the dependent named in the
 35 notice in the plan;

36 (7) The plan administrator shall enroll the dependent and if necessary the obligor in the
 37 plan selected under this paragraph. The plan administrator shall enroll the obligor if

1 enrollment of the obligor is necessary to enroll the dependent. All the following shall
 2 apply in the selection of the plan:

3 (A) If the obligor is enrolled in a health benefit plan that offers dependent coverage,
 4 the dependent shall be enrolled in the plan in which the obligor is enrolled;

5 (B) If the obligor is not enrolled in a plan or is not enrolled in a plan that offers
 6 dependent coverage, and if only one plan with dependent coverage is offered by the
 7 employer, that plan shall be selected;

8 (C) If the obligor is not enrolled in a health benefit plan that offers dependent coverage,
 9 and if more than one plan with dependent coverage is offered by the employer, and if
 10 the notice is issued by the IV-D agency, all of the following shall apply:

11 (i) If only one of the plans is accessible to the dependent, that plan shall be selected.
 12 If none of the plans with dependent coverage is accessible to the dependent, the IV-D
 13 agency shall amend or terminate the notice;

14 (ii) If more than one of the plans is accessible to the dependent, the plan selected
 15 shall be the plan for basic coverage for which the employee's share of the premium
 16 is lowest;

17 (iii) If more than one of those plans is accessible to the dependent, but none of the
 18 accessible plans is for basic coverage, the plan selected shall be an accessible plan for
 19 which the employee's share of the premium is the lowest; and

20 (iv) If the employee's shares of the premiums are the same, the IV-D agency shall
 21 consult the obligee and select a plan. If the obligee does not respond within ten days,
 22 the IV-D agency shall select a plan which shall be the plan's default option, if any, or
 23 the plan with the lowest deductibles and copayment requirements; and

24 (D) If the obligor is not enrolled in a plan or is not enrolled in a plan that offers
 25 dependent coverage, and if more than one plan with dependent coverage is offered by
 26 the employer, and if the notice is issued by a IV-D child support enforcement agency
 27 of another state, that agency shall select the plan as provided in paragraph (8) of this
 28 subsection; and

29 (8) Within 40 business days after the date of the notice, the plan administrator shall do
 30 all of the following as directed in the notice:

31 (A) Complete the appropriate portion of the notice and return to the person or entity
 32 sending the notice;

33 (B) If the dependent is enrolled or is to be enrolled, notify the obligor, the obligee, and
 34 the child and furnish the obligee with necessary information including any necessary
 35 claim forms or enrollment membership cards necessary to obtain benefits and provide
 36 the person or entity sending the notice with the type of health benefit plan under which
 37 the dependent has been enrolled, including whether dental, optical, office visits, and

1 prescription drugs are covered services, and with a brief description of the applicable
 2 deductibles, coinsurance, waiting period for preexisting medical conditions, and other
 3 significant terms or conditions which materially affect the coverage;

4 (C) If more than one plan is available to the obligor and the obligor is not enrolled,
 5 forward plan descriptions and documents to the person or entity sending the notice and
 6 enroll the dependent, and if necessary the obligor, in the plan selected by the person or
 7 entity sending the notice or any default option if the plan administrator has not received
 8 a selection from the person or entity sending the notice within 20 business days of the
 9 date the plan administrator returned the National Medical Support Notice response to
 10 the person or entity sending the notice;

11 (D) If the obligor is subject to a waiting period that expires more than 90 days from the
 12 date the plan administrator received the notice or has not completed a waiting period
 13 whose duration is determined by a measure other than the passage of time, notify the
 14 employer, the person or entity sending the notice, the obligor, and the obligee; and upon
 15 satisfaction of the period or requirement, complete the enrollment;

16 (E) Upon completion of the enrollment, notify the employer for a determination of
 17 whether the necessary employee share of the premium is available; and

18 (F) If the plan administrator is subject to the federal Employee Retirement Income
 19 Security Act, as codified in 29 U.S.C. Section 1169, and the plan administrator
 20 determines the notice does not constitute a qualified medical child support order,
 21 complete and send the response to the person or entity sending the notice and notify the
 22 obligor, the obligee, and the child of the specific reason for the determination."

23 SECTION 7.

24 Said title is further amended by striking Code Section 19-11-28, relating to accident and
 25 sickness insurance coverage for children, notice of coverage, authorization of payments of
 26 benefits, notice of termination, and immunity from liability of person or entity providing
 27 access to coverage, and inserting in its place the following:

28 "19-11-28.

29 ~~(a) Any person or entity providing access to accident or sickness insurance coverage on~~
 30 ~~behalf of the obligor pursuant to a notice of enrollment shall furnish to the person or entity~~
 31 ~~sending the notice of enrollment the name of the accident and sickness insurance coverage~~
 32 ~~provider, the extent of coverage available, and any necessary claim forms or enrollment~~
 33 ~~membership cards necessary to obtain benefits.~~

34 ~~(b)~~(a) The signature of the obligee or an agent of the department shall constitute a valid
 35 authorization to any insurer to process benefits and to make payments to a health care
 36 provider or the obligee in accordance with any accident and sickness insurance policy.

1 ~~(e)~~(b) An order of medical support shall operate as an assignment to the support obligee
 2 of any right to benefits under a policy of accident and sickness coverage maintained by the
 3 obligor insofar as dependent coverage is available. The support obligee shall be subrogated
 4 to the rights of the obligor to the extent necessary to pursue any claim against the insurer
 5 under such policy.

6 ~~(d)~~(c) Within ten business days after termination of a policy of accident and sickness
 7 insurance established pursuant to Code Section 19-11-27, or the termination of
 8 employment of the obligor, the person or entity providing access to such coverage on
 9 behalf of a support obligor shall mail a termination notice to the person or entity which
 10 initially sent a notice of enrollment or National Medical Support Notice and provide the
 11 obligor's last known address and, if known, the address of the obligor's new employer.

12 ~~(e)~~(d) Any person or entity providing access to accident and sickness coverage on behalf
 13 of a support obligor shall be immune from any civil or criminal liability while complying
 14 in good faith with the provisions of this Code section and Code Section 19-11-27.

15 ~~(f)~~(e) Any person or entity acting as a plan fiduciary who makes payment pursuant to this
 16 Code section discharges to the extent of any payment the plan's obligation."

17 **SECTION 8.**

18 Said title is further amended by striking subsection (a) of Code Section 19-11-29, relating
 19 to accident and sickness insurance coverage for children, liability, and penalty applicable to
 20 person or entity providing access to coverage and insurers, and inserting in its place the
 21 following:

22 "(a) Any person or entity providing access to accident and sickness insurance coverage on
 23 behalf of a support obligor in connection with the obligor's employment or union shall be
 24 liable for a civil penalty not to exceed \$1,000.00 per occurrence for failure to enroll
 25 promptly, without regard to enrollment season restrictions, a dependent in an accident and
 26 sickness insurance plan under an order of medical support or a notice of enrollment;
 27 provided, however, that no liability shall exist where such person or entity acts in
 28 accordance with subsection ~~(d)~~ (g) of Code Section 19-11-27."

29 **SECTION 9.**

30 Said title is further amended by striking Code Section 19-11-30.1, relating to computer based
 31 registry, and inserting in its place the following:

32 "19-11-30.1.

33 The ~~Department of Administrative Services~~ department shall establish a computer based
 34 registry of account data obtained from financial institutions doing business in this state.
 35 Such registry shall include only identifying information for obligors whom the IV-D

1 agency believes owe child support and who are not under a child support order, and for
 2 obligors who are delinquent in an amount equal to or in excess of their support payment
 3 for one month. Such registry shall be known as the ~~Department of Administrative Services~~
 4 Department of Human Resources Bank Match Registry. The IV-D agency shall be the sole
 5 agency with access to this data. Access shall be for the purpose of establishing and
 6 enforcing orders for support. The ~~Department of Administrative Services~~ department is
 7 authorized to ~~enter into an agreement with the department establishing~~ establish the
 8 procedures and the costs to be paid by the department to the Department of Administrative
 9 ~~Services~~ for performing the data searches and for providing the data to the department's
 10 IV-D agency."

11 **SECTION 10.**

12 Said title is further amended by striking subsections (b), (c), and (d) of Code Section
 13 19-11-30.2, relating to definitions and information from financial institutions, and inserting
 14 in their places the following:

15 "(b) The ~~Department of Administrative Services~~ department shall, pursuant to the
 16 provisions of subsection (f) of this Code section, request from each financial institution,
 17 not more frequently than on a quarterly basis, the name, record address, social security
 18 number, and other identifying data for each person listed in such request who maintains an
 19 account at such financial institution. The data provided shall be sent to the Department of
 20 ~~Administrative Services~~ Human Resources Bank Match Registry. Such registry shall
 21 include only identifying information for obligors whom the IV-D agency believes owe
 22 child support and who are not under a child support order, and for obligors who are
 23 delinquent in an amount equal to or in excess of their support payment for one month. The
 24 ~~Department of Administrative Services~~ department shall update such listing every calendar
 25 quarter by removing the names of all persons who have had no prior matches in the two
 26 immediately preceding quarters.

27 (c) The ~~Department of Administrative Services~~ department may continue to request
 28 account matches on such removed names once a year for the two calendar years
 29 immediately following the year in which the names are removed or for cause.

30 (d) All requests made by the ~~Department of Administrative Services~~ department pursuant
 31 to subsection (b) or (c) of this Code section shall be in machine readable form unless a
 32 financial institution expressly requests the department to submit the request in writing. The
 33 financial institution shall furnish all such information in machine readable form, which
 34 meets criteria established by the ~~Department of Administrative Services~~ department, within
 35 30 days of such request. Each financial institution shall furnish all such information on

1 those persons whose accounts bear a residential address within the state at the time such
2 request is processed by the financial institution."

3 **SECTION 11.**

4 Said title is further amended by striking Code Section 19-11-30.3, relating to the
5 responsibility of the Department of Administrative Services Bank Match Registry, and
6 inserting in its place the following:

7 "19-11-30.3.

8 The Department of ~~Administrative Services~~ Human Resources Bank Match Registry shall
9 examine the data provided, make positive identification of cases submitted by the
10 ~~Department of Human Resources~~ IV-D agency for child support enforcement purposes, and
11 report the matched accounts to the ~~Department of Human Resources~~ in machine readable
12 form. Upon the receipt of such information, the ~~Department of Human Resources~~
13 department, and where appropriate local contractors, shall seek to verify the accuracy of
14 the information presented."

15 **SECTION 12.**

16 Said title is further amended by striking Code Section 19-11-30.5, relating to failure of a
17 financial institution to comply, and inserting in its place the following:

18 "19-11-30.5.

19 Any financial institution required to submit a report pursuant to Code Section 19-11-30.2
20 which fails without reasonable cause as determined by the ~~Department of Administrative~~
21 ~~Services~~ department to comply with such reporting requirements and which, after
22 notification by certified mail or statutory overnight delivery by the ~~Department of~~
23 ~~Administrative Services~~ department, return receipt requested, of such failure, continues for
24 more than 15 business days after the mailing of such notification to fail to comply without
25 reasonable cause shall be liable for a penalty of \$1,000.00. Any financial institution which
26 willfully provides false information in reply to such notification shall be liable for a penalty
27 of \$1,000.00."

28 **SECTION 13.**

29 Said title is further amended by striking Code Section 19-11-30.6, relating to reciprocal
30 agreements with other states, and inserting in its place the following:

31 "19-11-30.6.

32 The commissioner of ~~administrative services~~ human resources, in cooperation with the
33 IV-D agency, shall establish a program of wage and bank information sharing with other
34 states. The commissioner is authorized to enter into reciprocal agreements with other states

1 to share lists of absent parents who owe support payments to the IV-D agency. Such
 2 reciprocal agreements shall only be made with states which administer programs that the
 3 commissioner of ~~administrative services~~ human resources, in consultation with the IV-D
 4 agency, determines are substantially similar. The wage and bank information sharing
 5 program shall apply only to states which have similar prohibitions and penalties for
 6 disclosure of information. The prohibitions and penalties of Code Section 19-11-30.4 shall
 7 also apply to any such information received from any other state under a reciprocal
 8 agreement."

9 **SECTION 14.**

10 Said title is further amended by striking Code Section 19-11-30.7, relating to construction,
 11 and inserting in its place the following:

12 "19-11-30.7.

13 Code Sections 19-11-30, 19-11-30.4, and 19-11-30.6 shall not be construed to prevent the
 14 release by the ~~commissioners of administrative services and~~ commissioner of human
 15 resources of such wage and bank information data for the purposes described in Title IV-D
 16 of the federal Social Security Act."

17 **SECTION 15.**

18 Said title is further amended by striking Code Section 19-11-30.8, relating to annual reports,
 19 and inserting in its place the following:

20 "19-11-30.8.

21 The commissioner of ~~administrative services~~ human resources shall file an annual report
 22 describing the status of the wage reporting and bank match systems. The report shall be
 23 filed with the Clerk of the House of Representatives and the Secretary of the Senate for the
 24 previous state fiscal year no later than September 30 of each year."

25 **SECTION 16.**

26 Said title is further amended by striking Code Section 19-11-30.9, relating to information
 27 subject to disclosure and penalty, and inserting in its place the following:

28 "19-11-30.9.

29 As an exception to Code Section 7-1-360, a financial institution furnishing a report or
 30 providing information for the commissioner of ~~administrative services~~ human resources
 31 under Code Section 19-11-30.2 shall not disclose to a depositor or an account holder that
 32 the name of such person has been received from or furnished to the ~~Department of~~
 33 ~~Administrative Services~~ department; provided, however, that a financial institution may
 34 disclose to its depositors or account holders that under the bank match system the

1 ~~Department of Administrative Services~~ department has the authority to request certain
 2 identifying information on certain depositors or account holders. If a financial institution
 3 willfully violates the provisions of this Code section, such institution shall pay to the
 4 ~~Department of Administrative Services~~ department the lesser of \$1,000.00 or the amount
 5 on deposit or in the account of the person to whom such disclosure was made. A financial
 6 institution shall incur no obligation or liability to a depositor or account holder or any other
 7 person arising from the furnishing of a report or information to the ~~Department of~~
 8 ~~Administrative Services~~ department pursuant to Code Section 19-11-30.2 or from the
 9 failure to disclose to a depositor or account holder that the name of such person was
 10 included in a list furnished by the ~~Department of Administrative Services~~ department or
 11 in a report furnished by the financial institution to the ~~Department of Administrative~~
 12 ~~Services~~ department."

13 **SECTION 17.**

14 Said title is further amended by striking Code Section 19-11-30.11, relating to a fee on levied
 15 accounts, and inserting in its place the following:

16 "19-11-30.11.

17 A financial institution may charge an account levied on by the commissioner of human
 18 resources a fee, as determined by the commissioner, of not less than \$20.00 nor more than
 19 \$50.00 which shall be deducted from such account prior to remitting funds to the
 20 ~~Department of Human Resources~~ department. The commissioner of ~~administrative services~~
 21 human resources requesting bank or account information under Code Section 19-11-30.2
 22 shall not be liable for costs otherwise assessable pursuant to Code Section 7-1-237."

23 **SECTION 18.**

24 All laws and parts of laws in conflict with this Act are repealed.