

House Bill 1224 (COMMITTEE SUBSTITUTE) (AM)

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; to amend Article 2
2 of Chapter 6 of Title 5 of the Official Code of Georgia Annotated, relating to appellate
3 practice, so as to provide for direct appeal of certain judgments or orders involving child
4 support awards; to amend Title 19 of the Official Code of Georgia Annotated, relating to
5 domestic relations, so as to authorize the use of the National Medical Support Notice to
6 enforce medical support provisions of a child support order; to prohibit a payor from
7 deducting a fee for complying with an order for enrollment in a health benefit plan; to
8 provide for payment for a genetic test to establish paternity; to provide for the notification
9 of employers and health insurers of an order to enforce accident and sickness coverage; to
10 provide the obligor with the right and means to contest withholding of insurance premiums;
11 to authorize the Department of Human Resources to adopt rules and regulations; to provide
12 for notice of enrollment in a plan and establishment of coverage for accident and sickness
13 insurance in compliance with a child support order; to provide for notice of termination of
14 employment to the person or entity that sent a National Medical Support Notice; to change
15 cross-references; 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 A.**

21 Article 2 of Chapter 6 of Title 5 of the Official Code of Georgia Annotated, relating to
22 appellate practice, is amended in subsection (a) of Code Section 5-6-34, relating to
23 judgments and rulings deemed directly appealable, procedure for review of judgments,
24 orders, or decisions not subject to direct appeal, scope of review, and hearings in criminal
25 cases involving a capital offense for which death penalty is sought, by inserting a new
26 paragraph to read as follows:

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1 "(5.2) All judgments or orders involving an award of child support;"

2 **SECTION B.**

3 Said article is further amended in Code Section 5-6-35, relating to cases requiring application
4 for appeal, contents, filing, and service of application, exhibits, response by opposing party,
5 issuance of appellate court order regarding appeal, procedure, supersedeas, and jurisdiction
6 of appeal, by striking paragraph (2) of subsection (a) and inserting in lieu thereof the
7 following:

8 "(2) Appeals from judgments or orders in divorce, alimony, child custody, and other
9 domestic relations cases including, but not limited to, granting or refusing a divorce or
10 temporary or permanent alimony, awarding or refusing to change child custody, or
11 holding or declining to hold persons in contempt of such alimony or child custody
12 judgment or orders, except as otherwise provided by paragraph (5.2) of subsection (a) of
13 Code Section 5-6-34;".

14 **SECTION 1.**

15 Title 19 of the Official Code of Georgia Annotated, relating to domestic relations, is
16 amended in Code Section 19-6-31, relating to definitions, by adding between paragraphs (8)
17 and (9) a new paragraph (8.1) to read as follows:

18 "(8.1) 'National Medical Support Notice' means a notice as prescribed under 42 U.S.C.
19 Section 666(a)(19), or a substantially similar notice, which is issued and forwarded by
20 the IV-D agency to enforce the medical support provisions of a support order."

21 **SECTION 2.**

22 Said title is further amended by striking paragraph (2) of subsection (a) of Code Section
23 19-6-32, relating to entering income deduction order for award of child support, when order
24 effective, and hearing on order, and inserting in its place the following:

25 "(2) For all child support orders, and spousal support orders enforced pursuant to
26 subsection (d) of Code Section 19-11-6, the IV-D agency shall be authorized to issue an
27 order for income deduction without need for any amendment to the order involved or any
28 further action by the court or entity that issued it, provided that an opportunity for a
29 hearing before a court, a referee of the court, or an administrative law judge is afforded.
30 The IV-D agency shall also be authorized to issue a National Medical Support Notice to
31 enforce the medical support provisions of such orders, provided that an opportunity for
32 a hearing pursuant to Code Section 19-11-27 is afforded. Such ~~order~~ orders or notices
33 may be issued electronically by the IV-D agency. The IV-D agency shall issue an order
34 for income deduction or, when appropriate, a National Support Medical Notice within

1 two business days after the information regarding a newly hired employee is entered into
 2 the centralized employee registry pursuant to Code Section 19-11-9.2 and matched with
 3 an obligor in a case being enforced by the IV-D agency."

4 SECTION 3.

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

8 "(5) Provide that the payor may collect up to \$25.00 against the obligor's income to
 9 reimburse the payor for administrative costs for the first income deduction pursuant to
 10 an income deduction order and up to \$3.00 for each deduction thereafter. The payor of
 11 income may not deduct a fee for complying with any order or notice for enrollment in a
 12 health benefit plan;".

13 SECTION 4.

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

18 "(f) In any case in which the court or the department orders genetic testing and one or both
 19 of the parties to the action is receiving child support services pursuant to Code Section
 20 19-11-6, the department shall pay the costs of such tests subject to recoupment from the
 21 alleged father if paternity is established. A second genetic test shall be ordered by the
 22 department if an order for paternity has not been issued and if the person making the
 23 request tenders payment of the cost of the test at the time of the request."

24 SECTION 5.

25 Said title is further amended by striking subsections (a) and (h) of Code Section 19-11-9.2,
 26 relating to duty of employers to report hiring or rehiring of persons, and inserting in their
 27 place the following:

28 "~~(a) Effective July 1, 1993, employers~~ Employers doing business in the State of Georgia
 29 shall report to the Georgia state support registry managed by the Department of
 30 ~~Administrative Services~~ Human Resources:

- 31 (1) The hiring of any person who resides or works in this state to whom the employer
 32 anticipates paying earnings; and
 33 (2) The hiring or return to work of any employee who was laid off, furloughed, separated,
 34 granted leave without pay, or terminated from employment."

1 "(h) The Department of ~~Administrative Services~~ Human Resources shall administer this
 2 registry and shall provide computer access to the authorized users. The Department of
 3 ~~Administrative Services~~ Human Resources shall be authorized to apportion the costs of the
 4 registry between the users."

5 SECTION 6.

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

10 "19-11-27.

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

17 (b) The National Medical Support Notice as prescribed under 42 U.S.C. Section
 18 666(a)(19) shall be issued, when appropriate, by the IV-D agency to notify employers and
 19 health insurers of an order entered or being enforced by the IV-D agency pursuant to Code
 20 Section 19-11-8 and to enforce the accident and sickness provisions of such order. The
 21 IV-D agency is not required to issue the National Medical Support Notice in cases where
 22 the court or administrative order stipulates alternative accident and sickness coverage that
 23 is not employer based.

24 ~~(b)(c)~~ Upon failure of a support obligor to obtain accident and sickness insurance coverage
 25 as ordered, or upon the lapse of coverage required to be provided, the department, the
 26 Department of Community Health, or the other party may issue and send a notice of
 27 enrollment or National Medical Support Notice by certified mail or statutory overnight
 28 delivery, return receipt requested, to the person or entity providing access to such coverage
 29 on behalf of the obligor. The notice shall include a certified copy of the latest order
 30 requiring health insurance coverage and the return address of the sender. ~~Upon receipt of~~
 31 ~~a notice of enrollment, any person or entity providing access to accident or sickness~~
 32 ~~insurance coverage on behalf of the obligor shall immediately undertake to provide such~~
 33 ~~coverage as specified in the notice of enrollment. Any person or entity providing access~~
 34 ~~to accident or sickness insurance coverage on behalf of the obligor shall be deemed~~
 35 ~~authorized to execute any document for the obligor in order to establish coverage. If more~~
 36 ~~than one insurance plan is available, coverage shall be established under the obligor's~~

1 existing plan or a previously existing plan where possible. If coverage under the obligor's
 2 existing plan or a previously existing plan cannot be established, the person or entity
 3 providing access to accident and sickness insurance coverage on behalf of the obligor shall
 4 establish coverage under the least expensive plan otherwise available.

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

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

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

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

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

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

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

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

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

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

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

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

25 (7) The plan administrator shall enroll the dependent and if necessary the obligor in the
 26 plan selected under this paragraph. The plan administrator shall enroll the obligor if
 27 enrollment of the obligor is necessary to enroll the dependent. All the following shall
 28 apply in the selection of the plan:

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

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

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

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

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

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

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

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

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

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

23 (B) If the dependent is enrolled or is to be enrolled, notify the obligor, the obligee, and
 24 the child and furnish the obligee with necessary information including any necessary
 25 claim forms or enrollment membership cards necessary to obtain benefits and provide
 26 the person or entity sending the notice with the type of health benefit plan under which
 27 the dependent has been enrolled, including whether dental, optical, office visits, and
 28 prescription drugs are covered services, and with a brief description of the applicable
 29 deductibles, coinsurance, waiting period for preexisting medical conditions, and other
 30 significant terms or conditions which materially affect the coverage;

31 (C) If more than one plan is available to the obligor and the obligor is not enrolled,
 32 forward plan descriptions and documents to the person or entity sending the notice and
 33 enroll the dependent, and if necessary the obligor, in the plan selected by the person or
 34 entity sending the notice or any default option if the plan administrator has not received
 35 a selection from the person or entity sending the notice within 20 business days of the
 36 date the plan administrator returned the National Medical Support Notice response to
 37 the person or entity sending the notice;

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

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

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

13 SECTION 7.

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

18 "19-11-28.

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

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

27 ~~(c)~~(b) An order of medical support shall operate as an assignment to the support obligee
 28 of any right to benefits under a policy of accident and sickness coverage maintained by the
 29 obligor insofar as dependent coverage is available. The support obligee shall be subrogated
 30 to the rights of the obligor to the extent necessary to pursue any claim against the insurer
 31 under such policy.

32 ~~(d)~~(c) Within ten business days after termination of a policy of accident and sickness
 33 insurance established pursuant to Code Section 19-11-27, or the termination of
 34 employment of the obligor, the person or entity providing access to such coverage on
 35 behalf of a support obligor shall mail a termination notice to the person or entity which

1 initially sent a notice of enrollment or National Medical Support Notice and provide the
 2 obligor's last known address and, if known, the address of the obligor's new employer.

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

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

8 SECTION 8.

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

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

20 SECTION 9.

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

23 "19-11-30.1.

24 The ~~Department of Administrative Services~~ department shall establish a computer based
 25 registry of account data obtained from financial institutions doing business in this state.
 26 Such registry shall include only identifying information for obligors whom the IV-D
 27 agency believes owe child support and who are not under a child support order, and for
 28 obligors who are delinquent in an amount equal to or in excess of their support payment
 29 for one month. Such registry shall be known as the ~~Department of Administrative Services~~
 30 Department of Human Resources Bank Match Registry. The IV-D agency shall be the sole
 31 agency with access to this data. Access shall be for the purpose of establishing and
 32 enforcing orders for support. The ~~Department of Administrative Services~~ department is
 33 authorized to ~~enter into an agreement with the department establishing~~ establish the
 34 procedures and the costs to be paid by the department to the Department of Administrative

1 ~~Services~~ for performing the data searches and for providing the data to the department's
2 IV-D agency."

3 **SECTION 10.**

4 Said title is further amended by striking subsections (b), (c), and (d) of Code Section
5 19-11-30.2, relating to definitions and information from financial institutions, and inserting
6 in their places the following:

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

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

22 (d) All requests made by the ~~Department of Administrative Services~~ department pursuant
23 to subsection (b) or (c) of this Code section shall be in machine readable form unless a
24 financial institution expressly requests the department to submit the request in writing. The
25 financial institution shall furnish all such information in machine readable form, which
26 meets criteria established by the ~~Department of Administrative Services~~ department, within
27 30 days of such request. Each financial institution shall furnish all such information on
28 those persons whose accounts bear a residential address within the state at the time such
29 request is processed by the financial institution."

30 **SECTION 11.**

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

34 "19-11-30.3.

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

8 **SECTION 12.**

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

11 "19-11-30.5.

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

21 **SECTION 13.**

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

24 "19-11-30.6.

25 The commissioner of ~~administrative services~~ human resources, in cooperation with the
 26 IV-D agency, shall establish a program of wage and bank information sharing with other
 27 states. The commissioner is authorized to enter into reciprocal agreements with other states
 28 to share lists of absent parents who owe support payments to the IV-D agency. Such
 29 reciprocal agreements shall only be made with states which administer programs that the
 30 commissioner of ~~administrative services~~ human resources, in consultation with the IV-D
 31 agency, determines are substantially similar. The wage and bank information sharing
 32 program shall apply only to states which have similar prohibitions and penalties for
 33 disclosure of information. The prohibitions and penalties of Code Section 19-11-30.4 shall
 34 also apply to any such information received from any other state under a reciprocal
 35 agreement."

SECTION 14.

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

"19-11-30.7.

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

SECTION 15.

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

"19-11-30.8.

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

SECTION 16.

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

"19-11-30.9.

As an exception to Code Section 7-1-360, a financial institution furnishing a report or providing information for the commissioner of ~~administrative services~~ human resources under Code Section 19-11-30.2 shall not disclose to a depositor or an account holder that the name of such person has been received from or furnished to the ~~Department of Administrative Services~~ department; provided, however, that a financial institution may disclose to its depositors or account holders that under the bank match system the ~~Department of Administrative Services~~ department has the authority to request certain identifying information on certain depositors or account holders. If a financial institution willfully violates the provisions of this Code section, such institution shall pay to the ~~Department of Administrative Services~~ department the lesser of \$1,000.00 or the amount on deposit or in the account of the person to whom such disclosure was made. A financial institution shall incur no obligation or liability to a depositor or account holder or any other person arising from the furnishing of a report or information to the ~~Department of Administrative Services~~ department pursuant to Code Section 19-11-30.2 or from the failure to disclose to a depositor or account holder that the name of such person was

1 included in a list furnished by the ~~Department of Administrative Services~~ department or
2 in a report furnished by the financial institution to the ~~Department of Administrative~~
3 ~~Services~~ department."

4 **SECTION 17.**

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

7 "19-11-30.11.

8 A financial institution may charge an account levied on by the commissioner of human
9 resources a fee, as determined by the commissioner, of not less than \$20.00 nor more than
10 \$50.00 which shall be deducted from such account prior to remitting funds to the
11 ~~Department of Human Resources~~ department. The commissioner of ~~administrative services~~
12 human resources requesting bank or account information under Code Section 19-11-30.2
13 shall not be liable for costs otherwise assessable pursuant to Code Section 7-1-237."

14 **SECTION 18.**

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