

JACKSON COUNTY FRIEND OF THE COURT

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INFORMATION REGARDING ORTHODONTIA

Each parent **must** read and comply with the court order. Before reading this information sheet, *first* carefully review our *Instructions for Filing the Client Demand for Medical Payment* form, since those instructions outline the process that has been established for enforcement of all uninsured medical expenses. This information sheet contains some additional information you need to know about orthodontia given its complex nature.

Review your court order to determine if “joint legal custody” has been ordered. Joint legal custody means both parents **must** share in the decision-making authority regarding major decisions affecting the welfare of the child. Major decisions include medical care, education, and religion. The Friend of the Court recognizes orthodontia as a major medical decision. A parent who has “sole legal custody” is the only person who has the legal authority to make major decisions on behalf of the child.

If joint legal custody applies, the other parent **must** be contacted *first* before any decisions can be made regarding orthodontia.

If joint legal custody applies, and the other parent refuses to agree to orthodontia, you would have to file a motion if you want to ask the Court to order the orthodontia treatment. ***If you fail to consult with and/or obtain the agreement of the other parent, the Court may decide to make you liable for the full costs of uninsured orthodontia.***

If the other party agrees to orthodontia, a demand for medical payment ***must be submitted to the other party within 28 days of the date of the initial service or within 28 days after the insurer’s final payment or denial of coverage.*** Refer to the “Procedure” section in our *Instructions for Filing the Client Demand for Medical Payment* form for specific details. In addition, when submitting your demand to the other party, include a copy of the signed contract between yourself and the orthodontist. The contract must show what the entire procedure, start to finish including initial fees and monthly fees will cost. The contract must also show the portion the insurance company will cover. If there is no insurance involved, make sure the orthodontist includes that information on the contract. ***Submit the total orthodontia bill as one demand.*** Do NOT combine orthodontia with other health care expenses.

If the other party refuses to cooperate or respond to the demand for medical payment within 28 days of your submission date, a copy of your demand for medical payment, along with the attachments, can be submitted to our office for enforcement.

If you have any questions about this process, please feel free to contact our office. Thank you for your cooperation in this matter.

Last Revised: 01/02/13