

Case Name:  
Case Number:  
Date:  
DHS Office:  
Specialist / ID: /  
Phone:  
Fax:  
Individual ID:

**STATE OF MICHIGAN**  
**Department of Human Services**

If you do not understand this, call a DHS office in your area.  
DHS employees are prohibited by law from providing legal advice.  
Si usted no entiende esto, llame a una oficina de DHS en su área.  
La ley prohíbe a los empleados de DHS proporcionar asesoría legal.  
إذا واجهت صعوبة في فهم هذا الطلب، فأتصل بمكتب DHS الموجود في منطقتك.  
يحرم القانون على موظفي DHS إعطاء النصيحة القانونية.

Department of Human Services (DHS) will not discriminate against any individual or group because of race, religion, age, national origin, color, height, weight, marital status, sex, sexual orientation, gender identity or expression, political beliefs or disability. If you need help with reading, writing, hearing, etc., under the Americans with Disabilities Act, you are invited to make your needs known to a DHS office in your area.

**CLAIM OF GOOD CAUSE - CHILD SUPPORT**

**CLIENT:** This form tells you about good cause for not cooperating in child support actions. To claim good cause, you must complete Section 2 on the back of this form.

<p>1. <b>WHAT THE LAWS REQUIRE</b> - Federal and state laws require the Department of Human Services to seek support from each child's absent parent(s). The laws require you to cooperate in all support actions in order to receive Family Independence Program (FIP), Food Assistance Program (FAP), Medicaid (MA) and/or Child Development and Care (CDC). Cooperation means you must:</p> <ul style="list-style-type: none"><li>• Contact the child support specialist when requested</li><li>• Tell the specialist the absent parent's name and address</li><li>• Give the specialist any other information requested</li><li>• Help in any court actions started</li></ul> <p><b>THE BENEFITS OF COOPERATION</b> - You and your child will benefit from cooperating in the following ways:</p> <ul style="list-style-type: none"><li>• Finding the absent parent</li><li>• Establishing paternity</li><li>• Establishing support payments</li><li>• Establishing rights to benefits from the absent parent's social security, veteran's benefits, health insurance, medical coverage, etc.</li><li>• Establishing rights to medical support</li></ul> <p><b>WHAT HAPPENS IF YOU DON'T COOPERATE</b> - Unless you have "good cause" for not cooperating with support actions, your benefits may be reduced and/or stopped. However, your child's MA coverage will continue.</p>	<p><b>WHAT GOOD CAUSE IS</b> - Sometimes it is not in your child's best interest to take support or paternity actions. The law allows us to make an exception to the cooperation rules if you have a "good cause" reason for not cooperating. Good cause reasons are:</p> <ul style="list-style-type: none"><li>• Support actions would put you or your child in danger of Domestic Violence.</li><li>• You do not want the child to know who the father is because you got pregnant by a close relative (incest) or because of sexual assault.</li><li>• You have started court action to have your child adopted by someone else.</li><li>• You are working with an agency to decide if you should let your child be adopted.</li></ul> <p>If you claim good cause you may be asked to provide one of the following:</p> <ul style="list-style-type: none"><li>• Records showing support or paternity actions would result in physical or emotional harm</li><li>• Birth, medical or police records showing you got pregnant due to sexual assault or incest</li><li>• Court records showing pending adoption of your child</li><li>• Records showing you are working with an agency to consider having your child adopted</li></ul>
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**HOW WE CAN HELP YOU** – Child support specialists serve as liaisons between you, the local prosecutor or the Friend of the Court (FOC). The prosecutor is the one who takes the legal action to obtain a support order against the absent parent. The FOC are the ones who enforce existing support orders.

**WHAT WE WILL DECIDE** - We must decide if good cause exists. We will tell you our decision. We will make one of these three decisions:

- Good cause exists and we will not take action.
- Good cause does not exist and we will take action.
- Good cause exists to excuse your cooperation but we will continue to take action without your help and without endangering you or your child.

The support specialist will review our decision. In any case, you can withdraw your application if you do not want support action taken.

If good cause is found and your case opens, the good cause will be reviewed each time eligibility is redetermined. You may lose your good cause protection as a result of this review. You will then be required to cooperate with support actions. If you do not cooperate, your benefits may be reduced and/or stopped.

**IF YOU DO NOT AGREE** - Any time you do not agree with the Department's action, you may request a review, conference or hearing. The child support specialist may take part in any of these steps. You may have witnesses, legal counsel and friends or relatives. However, we cannot reimburse you for legal costs.

**IF YOU WISH TO CLAIM GOOD CAUSE** - Complete and sign Section 2.

2. I claim good cause for not cooperating in child support actions for the child(ren) listed below because I believe that cooperation would be against the best interest of this child(ren). I understand that the Department will determine if I have good cause for refusing to cooperate.

<p>a. Basis of harm (x all that apply)</p> <p>1. <input type="checkbox"/> Danger of physical harm to: <input type="checkbox"/> myself <input type="checkbox"/> child(ren)</p> <p>2. <input type="checkbox"/> Danger of emotional harm to: <input type="checkbox"/> myself <input type="checkbox"/> child(ren)</p> <p>3. <input type="checkbox"/> Child was conceived due to: <input type="checkbox"/> sexual assault <input type="checkbox"/> incest</p> <p>4. <input type="checkbox"/> Adoption of the child(ren) is pending.</p> <p>5. <input type="checkbox"/> I am working with an agency to decide if I should place the child(ren) for adoption.</p>	<p>b. Names of child(ren) affected:</p> <p>1.</p> <p>2.</p> <p>3.</p> <p>4.</p>
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<p>c. These statements are true to the best of my knowledge. I understand I must furnish the Department with the name and address of the absent parent, if known, as part of this claim.</p>	<p>Signature</p>	<p>Date</p>
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3. **TO SUPPORT SPECIALIST** (completed by worker) The above client has claimed good cause for failure to cooperate in child support actions. While the claim is pending, all support activities for the child(ren) listed in 2-b above must be pended. We will notify you of our finding on the claim. Your review of the claim and finding would be appreciated. We will forward copies of the documentation used in making the finding when received.

<p>The child(ren) <input type="checkbox"/> has <input type="checkbox"/> has <b>not</b> been referred for child support action.</p>	<p>Specialist Signature</p>	<p>Date</p>
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**AUTHORITY:** P.A. 280 of 1939, as amended, R 400.3009, .3010, .5008 MAC. Social Security Act, Sections 408 and 1912.  
**RESPONSE:** Required **PENALTY:** Potential Loss of Eligibility for Assistance