

Michigan IV-D Child Support Manual
Michigan Department of Health and Human Services

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1. Introduction

Increasingly, couples and individuals are using assisted reproductive technology (ART)¹ to become parents. In 2020, almost 80,000 children were born through in vitro fertilization² in the United States.³ Additionally, prospective parents may use intrauterine insemination or other technologies under medical supervision, or they may attempt to do so without medical involvement.

If parents or caretakers of the resulting children receive public assistance⁴ on behalf of those children, Michigan’s assistance program will refer them for IV-D services. In addition, a custodial party (CP), spouse, or donor not receiving public assistance may submit an application for IV-D services.

The procedures in this manual section apply only to CPs who have an obligation to cooperate with the IV-D program due to their receipt of public assistance and who assert that their inability to cooperate is due to the use of ART in the conception of the child.

¹ Assisted reproductive technology (ART) is a general term referring to methods used to achieve pregnancy by artificial or partially artificial means. It is used primarily in infertility treatments.

² In vitro fertilization involves mixing sperm with eggs surgically removed from an ovary, followed by uterine implantation of one or more of the resulting fertilized eggs.

³ Ref: [Centers for Disease Control \(CDC\) Assisted Reproductive Technology \(ART\) page](#).

⁴ “Public assistance” refers to the Family Independence Program (FIP), medical assistance, Child Development and Care (CDC), or Food Assistance Program (FAP) as described in [Section 2.05, “Referrals and Applications,”](#) of the *Michigan IV-D Child Support Manual*.

1.1 Michigan Law and the Use of Assisted Reproductive Technology (ART)

Michigan law does not specifically speak to the use of ART in the context of paternity or child support establishment and enforcement.

Because Michigan law is largely silent on the topic of ART, this manual section relies on definitions from the model Uniform Parentage Act (UPA).⁵

1.2 The Model Uniform Parentage Act (UPA)

In 2017, the National Conference of Commissioners on Uniform State Laws approved an updated model UPA after commentary from the American Bar Association. The UPA was amended with gender-neutral language to apply equally to same-sex couples.

The UPA recommends that states define ART as:

- (a) intrauterine insemination;
- (b) donation of eggs;
- (c) donation of embryos;
- (d) in vitro fertilization and transfer of embryos; and
- (e) intracytoplasmic sperm injection.⁶

ART may be performed either by a licensed physician or at home with or without the advice of a licensed physician.

2. Private Arrangements for ART and Public Assistance

[Section 2.15, "Cooperation/Noncooperation/Good Cause," of the *Michigan IV-D Child Support Manual*](#) defines the responsibility of CPs who receive assistance benefits on behalf of children to cooperate in establishing paternity and in establishing, enforcing, and modifying a child support order(s).

A CP may assert that the use of ART in the conception of a child, as identified in a private arrangement, is sufficient to exclude that CP from the requirement to cooperate in establishing paternity and/or a support order for that child.

To request a waiver of the child support cooperation requirement, the CP will complete the steps in Subsection 3.2.2(A), "Conception With Verified ART," of this manual section. The CP must provide documentation in support of his/her claim that ART was used to conceive the child. Supporting documentation can include receipts

⁵ The UPA is not Michigan law or federal law. It is draft legislation that states can use to enact their own state law.

⁶ Intracytoplasmic sperm injection is an in vitro fertilization procedure in which a single sperm is injected directly into an egg.

or agreements from Michigan or another state. If the CP does not provide supporting documentation, IV-D staff may not waive the cooperation requirement.

CPs who do not complete the steps in this manual section will continue to be required to cooperate with the child support program.

3. Support Specialist (SS) Responsibilities

Michigan law declares that a child born out of wedlock is a “child begotten and born to a woman who was not married from the conception to the date of birth of the child, or a child that the court has determined to be a child born or conceived during a marriage but not the issue of that marriage.”⁷

3.1 Parents Married During Conception or at Birth

Regardless of the method of conception, if the birth mother was married at any time between the date of conception and the date of birth, the IV-D program will presume the birth mother’s spouse to be the legal parent of the child,⁸ unless a court has determined otherwise.⁹

3.2 Parents Unmarried Between Conception and Birth

3.2.1 Child Conceived Without ART

If the mother of the child engaged in sexual intercourse at any time near the approximate conception date of the child, the SS will consider the sexual partner(s) as the most likely putative father(s) before applying the policies in this manual section. The SS will follow the provisions of Subsection 2.4.4, “Generating CARs in Some Unique Situations,” of [Section 2.20, “Court Action Referrals \(CARs\),” of the Michigan IV-D Child Support Manual.](#)

3.2.2 Child Conceived Using ART

SSs will request completion of the *Statement of Assisted Reproductive Technology* (DHS-998) in all cases where the CP claims that the child(ren) is the product of ART, and the birth parent was not married between conception and birth of the child(ren).

The DHS-998 requires the CP to attest to the use of ART and provide documented evidence supporting the method(s) of ART used to conceive the child(ren). The DHS-998 also directs the CP to return the completed

⁷ Michigan Compiled Law (MCL) 722.711

⁸ Ref: [IV-D Memorandum 2017-012, IV-D Services for Same-Sex Couples](#), for more information on IV-D referrals for and applications from same-sex spouses or couples.

⁹ MCL 552.29

form within 21 days of receipt of the form. SSs will pause case processing for 30 calendar days after the DHS-998 is sent to allow for mailing time. If a completed DHS-998 is not returned within 30 calendar days, SSs will resume case-processing activities.

CPs will mail the DHS-998 and any supporting documentation to:

Michigan Department of Health and Human Services
Office of Child Support
PO Box 30478
Lansing, MI 48909

Central Operations staff will use the upload functionality in the Michigan Child Support Enforcement System (MiCSES) to add the DHS-998 and any appropriate supporting documents to the *Historical Reprints* (FHST) screen.¹⁰

Note: The DHS-998 requests copies of supporting documentation and receipts but not medical records (e.g., medical test results). If the DHS-998 includes medical records as supporting documentation, Central Operations staff must not upload those items but will instead add a detailed note on the *Notes Processor* (NOTE) screen describing what was submitted.¹¹ Central Operations staff will dispose of the medical records in a manner consistent with Subsection 9.1.3, “Disposing of Paper Documents,” in [Section 1.10, Confidentiality/Security,](#)” of the [Michigan IV-D Child Support Manual](#).

After Central Operations staff upload¹² the DHS-998, they will send it along with any supporting documentation to the OCS Case Management team for an SS to review.

A. Conception With Verified ART

For the purposes of waiving the cooperation requirement for a CP attesting to the use of ART, the SS will consider any of the following as meeting the requirement:

1. Receipt or documentation for:

¹⁰ Ref: [IV-D Memorandum 2018-005, Uploading Documents to the Historical Reprints \(FHST\) Screen in the Michigan Child Support Enforcement System \(MiCSES\)](#) for more information on upload functionality in MiCSES.

¹¹ Ref: [MiCSES Screen Description: NOTE – Notes Processor](#) for information on how to add and view notes/comments.

¹² Ref: [MiCSES Screen Description: FHST – Historical Reprints](#) for more information on uploading and retrieving documents from the FHST screen.

- Intrauterine insemination;
 - Donation of eggs;
 - Donation of embryos;
 - In vitro fertilization and transfer of embryos;
 - Intracytoplasmic sperm injection; and/or
 - Genetic materials (e.g., sperm) likely used to conceive the child(ren).
2. Documentation that a licensed physician performed the procedure;
 3. Correspondence that outlines an arrangement for donation of genetic materials;¹³ and/or
 4. Other documentation that supports the CP's assertion that ART was used.

If the SS reviews the above information and determines an approved ART method resulted in the conception of the child(ren), the SS will waive the CP's requirement to cooperate with the child support program. The SS will then close the IV-D case with a closure code of "WQ" (Non-Public Assistance Applicant Requests Closure). The "WQ" code will be used to distinguish these case closures from duplicate or erroneous cases closed using the "MZ" (Case Merged/Opened in Error) reason code.

The SS will document the following in a IV-D case note on the NOTE screen:

- Receipt of a complete and signed DHS-998;
- Information the CP provided regarding the ART method used; and
- That the SS has reviewed the method or documentation submitted and has deemed it sufficient to support the DHS-998.

The SS will not:

- Compel a CP to divulge information about a donor; or
- Pursue paternity if it has not otherwise been established.

¹³ OCS recognizes that ART agreements between a CP and Donor may originate in another state, however that does not change OCS's position on the waiver of the cooperation requirements in relation to the Michigan IV-D program.

Example 1:

Alex is the mother of Taylor and receives cash assistance (FIP) with Taylor. Alex is referred for IV-D services as a result of Taylor's FIP, and MiCSES sends Alex the *First Customer Contact Letter* (OCS0015).

When Alex contacts an SS, Alex explains that Taylor was conceived when Alex underwent fertility treatments using a mail-order intrauterine insemination kit.

The SS requests that Alex complete the DHS-998 and provide documented evidence that Taylor was conceived as the result of ART. Alex returns a completed and signed DHS-998 explaining the procedure and attaches the receipt from the provider.

The receipt details that the purchase included frozen sperm and materials for intrauterine insemination. The SS determines that Taylor was the product of ART.

The SS enters this information as a IV-D case note in MiCSES and closes the IV-D case with a closure code of "WQ."

Example 2:

Alex is the mother of Taylor and receives cash assistance (FIP) with Taylor. Alex is referred for IV-D services as a result of Taylor's FIP, and MiCSES sends Alex the *First Customer Contact Letter* (OCS0015).

When Alex contacts an SS, Alex explains that Taylor was conceived using intracytoplasmic sperm injection treatment and genetic material donated from a family friend.

The SS requests that Alex complete the DHS-998 and provide supporting documentation that Taylor was conceived as the result of ART. Alex returns a completed and signed DHS-998 with supporting documentation.

The documentation details that the family friend agreed to donate the genetic material for the purpose of intracytoplasmic sperm injection. The SS determines that Taylor was the product of ART.

The SS enters this information as a IV-D case note in MiCSES and closes the IV-D case with a closure code of "WQ."

B. Conception Without Verified ART

When a CP asserts that the child was conceived by ART, but any of the following are true, the SS will process the case as (s)he would any other IV-D case:

1. The mother informs the SS that she has engaged in sexual intercourse during the approximate period of conception, and she agrees that conception of the child may have resulted from that activity;
2. The CP cannot provide documentation via the DHS-998 that an ART method resulted in the conception of the child;
3. The CP fails to return a completed and signed DHS-998 and supporting documentation within the timeframe identified in Subsection 3.2.2 above; or
4. Evidence exists that paternity has already been established for the child(ren).

The SS will require the CP to cooperate in providing any information necessary to establish paternity and to establish a child support order as described in Section 2.15 of the *Michigan IV-D Child Support Manual*.

Example 3:

Alex is the parent of Taylor and receives Medicaid on behalf of Taylor. Alex is referred for IV-D services as a result of Taylor's Medicaid, and MiCSES sends Alex the *First Customer Contact Letter* (OCS0015).

Alex contacts an SS and explains that Taylor was conceived after Alex ordered an artificial insemination kit by mail and used it.

The SS requests that Alex complete the DHS-998 and provide supporting documentation that Taylor was conceived as the result of ART. Alex returns a completed and signed DHS-998 explaining the use of a mail-order kit and attaches a copy of a receipt as evidence. The receipt contains only a generic description of the kit and does not specify the inclusion of genetic material.

Because the receipt does not specify the inclusion of genetic material, the SS cannot determine that Taylor was the product of ART.

The SS informs Alex that without more substantive evidence that Taylor's conception was the result of ART, Alex will be required to cooperate in identifying Taylor's other parent and in establishing paternity and a child support order.

3.3 Donor and CP Rights

No Michigan law denies either male or female donors their rights to establish parentage and obtain a child support order.

An SS's decision not to require the CP's cooperation in establishing paternity when ART resulted in the conception of a child does not preclude a donor from applying for and receiving IV-D services. Nor does this decision preclude the CP from applying for and receiving IV-D services at a later date if desired.

Refer to Section 2.05 of the *Michigan IV-D Child Support Manual* for procedures used when putative fathers or non-custodial parents apply for IV-D services.

SUPPORTING REFERENCES:

Federal
UPA (2017)

State
MCL 333.16273
MCL 333.20179
MCL 552.29
MCL 722.711-730
MCL 722.851-863

REVISION HISTORY:

[IV-D Memorandum 2023-020](#)
IV-D Memorandum 2016-021
IV-D Memorandum 2012-008