NONCOOPERATION NOTICE

Dear Ms. Doe:

Federal law and state policy require all persons receiving benefits from the Family Independence Program, Medicaid, Food Assistance Program and/or Child Development and Care to cooperate with the child support program.

You are considered to be noncooperative with the child support program because:

You did not respond to the first contact letter within 10 days.
You did not respond to the second contact letter by April 2, 2016.

In addition, you failed to provide the Office of Child Support with identifying information about the parent(s) not in the home.

Failure to cooperate with the child support program will result in a reduction of your benefits or case closure of your benefits unless you have a valid good-cause reason. You may contact your MDHHS worker to complete a Claim of Good Cause – Child Support (DHS-2168) form if:

- Cooperating would result in serious physical or emotional harm to the child or to you;
- The child’s birth was a result of incest or rape; or
- Adoption proceedings are pending.

Your MDHHS worker is aware of this letter and will inform you in writing how this will affect your case. If you would like to cooperate, please contact the Office of Child Support at (866) 540-0008.

Sincerely,

Office of Child Support
(866) 540-0008