

Michigan Office of Child Support – FAQ's Related to PEP

FAQ #1,274

Published 10/6/2015

Question:

I am a IV-D worker using the Central Paternity Registry and Birth Registry System (CPR/BRS), which indicates that that the Affidavit of Parentage (AOP) is in "pending" status (Hospital Pending Acknowledgment Record Type P). Should I file this case as a paternity establishment (DP) case or a family support (DS) case?

Answer:

While an AOP establishes paternity upon signing, a "pending" AOP status in CPR/BRS indicates the AOP has not been legally filed, per statute. It is only an indication that the hospital staff printed the AOP form and asked the parents to sign it. A properly completed AOP document must be received and filed by the Division for Vital Records and Health Statistics (DVRHS) before IV-D staff may consider DVRHS a reliable source for determining paternity establishment. Therefore, designating every court action referral (CAR) with a pending AOP status as a DS case would be inappropriate. However, there are certain criteria IV-D staff should consider to more accurately determine whether to file a case as either DP or DS:

If an AOP status shows as "pending" for more than 90 days, the case should always be filed as "DP." In this situation, the AOP may have been printed but not properly completed and/or received by DVRHS, and it may never be updated beyond the pending status. These cases will need additional paternity establishment information or services.

If the AOP is "pending" for less than 90 days, the IV-D worker should look at the child's birth certificate in BRS. If the father's name is on the birth certificate, this indicates the AOP has been signed, and that hospital staff updated the birth certificate with the father's information. Therefore, a DS case type may be the more appropriate designation. If the father's information is not on the birth certificate, then a DP CAR is appropriate.

There is some risk in relying on the birth certificate as recorded in BRS. Refer to [FAQ # 1275](#) for more information. The IV-D worker may change the case designation from DP to DS, or vice versa, as appropriate.

Ref: <https://mi-support.state.mi.us/Lists/FAQ/DispForm.aspx?ID=1274>

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Question:

I am a IV-D worker and have determined a case to be a family support (DS) case after following the direction in FAQ # 1274. What are the risks associated with relying on a “pending” Affidavit of Parentage (AOP) status and a father’s information on the birth certificate in the Central Paternity Registry and Birth Registry System (CPR/BRS) record in determining the case type?

Answer:

While a BRS record and a “pending” AOP status can provide some level of reliability, there is still a risk that the actual AOP form may never be filed with the Division for Vital Records and Health Statistics (DVRHS).

An AOP in a “pending” status only indicates that the AOP form was printed at the hospital, and that hospital staff asked the parents to sign it. After an AOP form is completed, the hospital may submit it to DVRHS, or the parents may take the incomplete AOP form with them with the intention of completing and submitting it later. There is a possibility that the AOP form may never reach DVRHS. It is also possible that the form may be submitted to DVRHS, but it is incomplete or improperly completed and therefore not proper for filing.

The risk associated with relying on the “pending” AOP and the BRS record is that the “pending” AOP may never get updated beyond the “pending” status. Therefore, if the AOP never reaches DVRHS or if the AOP form is incomplete or improperly completed, filing a case as a DS case type may be inappropriate. As an alternative, the IV-D worker may ask the parents for a copy of the AOP they signed. However, if the IV-D worker is unable to confirm the existence of a properly completed AOP, (s)he may have to dismiss the DS case and refile it as a paternity establishment (DP) case instead.

Ref: <https://mi-support.state.mi.us/Lists/FAQ/DispForm.aspx?ID=1275>