

ABOUT GRIEVANCE, COMPLAINTS, APPEALS & SECOND OPINIONS

WHAT CAN I DO IF...

I was denied mental health or inpatient psychiatric services?

- You can ask for a second opinion through the Access Center, and if your request for a second opinion is denied you can file a complaint with the Office of Recipient Rights, or
- you can request a local appeal of this decision by calling the Office of Recipient Rights, or
- appeal to the Michigan Department of Community Health.

I don't agree with my Individual Plan of Service?

- Speak with staff who provide your service about having another planning meeting, or
- you can request a local appeal through the Office of Recipient Rights, or
- file a recipient rights complaint with the Office of Recipient Rights, or
- appeal to the Michigan Department of Community Health.

My rights have been violated?

- At any time, you can file a recipient rights complaint with the Office of Recipient Rights.

My services have been denied, terminated, reduced, or suspended and I disagree?

- You can request a local appeal of this decision by calling the Office of Recipient Rights, or
- file a recipient rights complaint with the Office of Recipient Rights, or
- appeal to the Michigan Department of Community Health.

IMPORTANT PHONE NUMBERS

Recipient Rights:

Gentry Mohr (616)393-5660
Briana Fowler (616) 393-5763

Access Center

TTY (616) 393-5681
Toll free 1-877-588-4357

Customer Service

Toll free (616) 494-5545
1-866-710-7378

YOU HAVE RIGHTS

REGARDING YOUR INDIVIDUAL PLAN OF SERVICE

Your person-centered Individual Plan of Service describes which services and supports have been authorized for you.



If you do not agree with the type, length, or frequency of your services or supports, there are three things you should know:

First: You can ask the staff who provide you service to have another planning meeting. If you still don't agree, you can request a local appeal through the Office of Recipient Rights. This appeal will be conducted within forty-five (45) calendar days. To request a local appeal, call the Office of Recipient Rights within forty-five (45) days of receiving the notice letter.

Second: If you are a Medicaid recipient, you can also ask for an "Administrative Hearing" before an administrative law judge. The request must be in writing, signed by you or your authorized hearing representative. The Michigan Department of Community Health (DCH) must receive your request within 90 days of the date you sign your Individual Plan of Service. To request an administrative hearing, you will need to complete a Request for Administrative Hearing form or write to:

**Administrative Tribunal
Department of Community Health
PO Box 30763
Lansing, MI 48909**

Third: If you are a non-Medicaid recipient, you can ask for Dispute Resolution within ten (10) days of receipt of the written decision on the local dispute. To request dispute resolution, you or your authorized representative may file a request or write to:

**Department of Community Health
Division of Program Development, Consultation
& Contracts, Bureau of CMH Services
ATTN: Request for DCH Level Dispute
Resolution
Lewis Cass Building—6th Floor
Lansing, MI 48913**

If you have questions about filling out the form or how a hearing works, you can call the CMH Office of Recipient Rights or the Administrative Tribunal at 877-833-0870.

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