

If you have Medicaid

If you have Medicaid insurance and are filing an appeal, you may ask, at the same time, for an administrative law judge to look at your case. This is called a **Fair Hearing**. You must ask for a fair hearing within 90 days of getting a notice saying your services will be reduced or ended. In certain cases, when you ask for a hearing within 12 days of the notice, you may also ask that your services be continued - and you will receive your services until the judge makes a decision. If the judge upholds the change in your services, you may be asked to pay for them. Someone you trust may help you at the hearing.

If you do not have Medicaid

If you do not receive Medicaid, you may ask for a review of your case by the Michigan Department of Health and Human Services (MDHHS). This is called the **Alternative Dispute Resolution Process**. You must first try the other options listed in this brochure for solving your problem (except for the Fair Hearing option) before you can request a review. For help, you can call (810) 966-3399.

Customer Service

If you have questions about your rights or feel that your rights are not being respected, or for help filing a grievance or an appeal related to your **Community Mental Health** or **Substance Use Disorder** services, you can contact:

Region 10 PIHP

Attention: Recipient Rights Officer
3111 Electric Avenue, Suite A
Port Huron, MI 48060
Phone: (810) 966-3399

Genesee Health System

420 West Fifth Avenue
Flint, MI 48503
Phone: (810) 257-3705

Lapeer County Community Mental Health

1570 Suncrest Drive
Lapeer, MI 48446
Phone/TTY: (810) 667-0500

Sanilac County Community Mental Health

227 East Sanilac Avenue
Sandusky, MI 48471
Phone: (810) 648-0330
TTY: (810) 648-4327

St. Clair County Community Mental Health

3111 Electric Avenue
Port Huron, MI 48060
Phone: (810) 985-8900

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Grievance & Appeals Process



Region 10 PIHP
3111 Electric Avenue, Suite A
Port Huron, MI 48060
(810) 966-3399
www.region10pihp.org

Your link to public services for mental health and substance use disorders in Genesee, Lapeer, Sanilac, and St. Clair Counties.

Our promise to you

We want you to be satisfied with your mental health or substance use disorder (SUD) services. We expect you to be treated well. If you have a problem at your Community Mental Health (CMH) center or with your SUD provider, you have the right to make a complaint. This brochure tells you how. We promise that your complaint will be taken care of fairly and quickly.

Second Opinions at CMH

You may ask for a **Second Opinion** if you are:

- 1) Told you are not eligible for mental health services; or
- 2) Denied admission to a psychiatric hospital.

You can call the Customer Service line at **(888) 225-4447** to ask for a second opinion. A qualified professional will look at your case to see if the decision should be changed. Your request will be reviewed within five (5) working days. If you have been denied inpatient psychiatric services, you will be contacted within three (3) working days.

Talk about the problem

First, talk about your concerns to your program worker or therapist. You may also talk to a supervisor or call the Customer Service line at **(888) 225-4447**. All program workers should be helpful and courteous to you. After talking about your problem, you may still want to make a formal complaint, such as filing a **grievance**, **appealing** an action, requesting a **fair hearing** or using the **alternative dispute resolution process**.

Grievances

If you are unhappy with the quality of your services or how you are being treated at your CMH or substance use disorder program, you may file a complaint called a **grievance**. You may make the complaint with the supervisor of the program where you are having the problem. The supervisor will make a decision and get back to you within five (5) working days. If you do not like the supervisor's decision, another person will try to resolve the issue. For help filing a grievance, you can call the Customer Service line at **(888) 225-4447**. We will resolve your issue within sixty (60) days.

Appeals

You, or your provider on your behalf, may file an **appeal** when the following "actions" are taken:

- Your request for service is denied in full or in part.
- Your services are reduced, suspended or ended.
- The service you have received is not being paid for.

You must be notified of changes to your services. You may **appeal** if the CMH or SUD program **fails to**:

- Make a decision about your request for services within **14** calendar days.
- Make a decision within three (3) working days of your request for "expedited" services. An "expedited authorization decision" is based on your urgent health needs.
- Begin your services within **14** days of the start date in your person-centered plan or individualized treatment plan.
- Resolve your local appeal within **45** days.
- Act within three (3) working days of a request for an expedited appeal.
- Resolve a local grievance within **60** days of the request.