



Complaint Form

Grievance/Appeal

Complaints may be made in writing, by phone or in person with Customer Service or Compliance Staff.

If you want to discuss a **Complaint**, please contact the **Customer Service and Complaints Staff** at one of the following numbers:

- **General Customer Service:** (517) 346-8244
- **Jessica Scutt, Compliance/HIPAA Privacy Officer:** Compliance@ceicmh.org
- **Virginia Kallweit, Compliance Specialist:** Compliance@ceicmh.org

Consumer Information

Name: _____ Date of Birth: _____

Phone: _____ Address: _____

Person completing the form (if different than the consumer):

Name: _____

Phone: _____ Address: _____

What is the complaint?

See attached documentation (optional)

What do you think should be done to resolve the complaint?

See attached documentation (optional)

Signature: _____ Date: _____

Complaints

Examples of **Complaints** (not Recipient Rights issues) may include:

- Case Management issues
 - Missing belongings
 - HIPAA/Privacy concerns
 - Quality of care concerns
 - Request to change providers
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 - **If you want to discuss a Complaint, please contact the Customer Service and Compliance staff at one of the following numbers:**
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 - **Jessica Scutt, Compliance/HIPAA Privacy Officer: Compliance@ceicmh.org**
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