

Members in the public behavioral health system who are determined to have a serious mental illness (SMI) are entitled to extensive rights. Examples of rights for a person with SMI include, but are not limited to:

- The right to be free from mistreatment and abuse.
- The right to a written service plan that may include case management, crisis services, peer support, family support, medication, and inpatient/outpatient services.
- The right to consent or refuse treatment unless under a court order or guardianship.
- The right to review your medical records unless a physician determines it is not in your best interest.

An SMI grievance is a request for an investigation when a member’s rights may have been violated. Anyone can file an SMI grievance, and may do so within one year from the date of the incident. Include all helpful details such as events, names of individuals involved, titles, agencies and dates. When describing the grievance focus on the facts but don’t forget to include the solution you want.

HOW TO FILE

Grievances may be filed orally or in writing. We recommend filing in writing using the SMI grievance form AHCCCS ACOM Policy 446, Attachment A, which you can obtain from your RBHA or provider. Keep a copy for your records. To file your grievance orally, call your RBHA Customer Service or Office of Grievance & Appeals.

If you need assistance writing your grievance, contact an employee of a mental health agency or the AHCCCS Office of Human Rights (OHR). You can contact OHR at 602-364-4585 (Phoenix), 520-770-3100 (Tucson) or 928-214-8231 (Flagstaff). If you need documents to support your grievance, such as medical records or individual service plans, you have the right to request these records.

Within five days of receipt of your grievance, you will be notified from the Office of Grievance and Appeals that the grievance was received. In most cases, an investigator from the RBHA will interview you and others involved. The investigator will also review records and a decision will be made based on the evidence. In all but a few limited circumstances, if you disagree with the decision, you have the right to appeal. If your grievance is substantiated, a plan will be developed to correct any violations that were found.

You can make your written or verbal grievance to the RBHA Customer Service Department as follows:

BEHAVIORAL HEALTH PLANS

Steward Health Choice Arizona

Attn: Grievance and Appeals
1300 South Yale Street,
Flagstaff, AZ 86001

For Complaint via phone call:
1-800-640-2123

Arizona Complete Health

Attn: Grievance and Appeals
1870 W. Rio Salado Parkway, STE 2A
Tempe, AZ 85281

For Complaint via phone call:
1-866-495-6738

Mercy Care

Attn: Grievance Department
4755 S. 44th Place
Phoenix, AZ 85040

For Complaint via phone call:
602-586-1719 or 866-386-5794

The Arizona Health Care Cost Containment System (AHCCCS) is committed to ensuring the availability of timely, quality behavioral health care. If you know of an AHCCCS member who is unable to access behavioral health services, or if you have a concern about the quality of care, please call your AHCCCS health care plan’s Member Services number. If your concern is not resolved, please call AHCCCS Clinical Resolution Unit at 602-364-4558, or 1-800-867-5308.