

Filing a Formal Complaint (a.k.a. Member Grievance) in the Children's System

A **formal complaint** has the capacity to address the quality of care or services provided, or the way your child was treated. If you have a complaint or concern with a provider about the quality of care or services your child received, you may file a formal complaint. Reasons for complaints could include:

- Concern that the care or treatment provided lacked appropriate quality and/or could have been harmful
- Accessibility or availability of services as determined clinically necessary (including timely access)
- Wait times on the phone, for transportation, at a network pharmacy, in the provider waiting room
- Concerns about the way a provider treats the child and/or caregiver (in any aspect of care)
- Failure to provide information to which the guardian is entitled
- Inability to reach providers in a timely manner
- A child being mistreated and/or feeling abused
- When a child's rights are violated
- Practice protocols not being following - [12 Principles](https://tinyurl.com/TwelvePrinciples) (<https://tinyurl.com/TwelvePrinciples>)

Complaints can be made either orally or in writing to the Regional Behavioral Health Authority (RBHA) Customer Service Department (see below). In order to ensure your complaint is adequately documented, we recommend you file your complaint in writing. Written complaints will be acknowledged within 5 business days. If you make your complaint by phone, it will be acknowledged at that time. Most complaints can be resolved within 10 business days, but should take no longer than 90 calendar days.

Filing a formal complaint will not affect your health care services. Any retaliation would be considered a rights violation. Your feedback helps identify barriers to services and adherence to requirements. You can make your written or verbal complaint the RBHA Customer Service Department as follows:

BEHAVIORAL HEALTH PLANS	
<p style="text-align: center;"><u>Mercy Maricopa Integrated Care</u> Attn: Customer Service 4350 E. Cotton Center Blvd., Bldg. D, Phoenix, AZ 85040 For complaint via phone call: 602-586-1719 or 866-386-5794</p> <p style="text-align: center;"><u>Health Choice Integrated Care</u> Attn: Customer Service 1300 South Yale Street, Flagstaff, AZ 86001 For complaint via phone call: 1-800-640-2123</p>	<p style="text-align: center;"><u>Cenpatico Integrated Care</u> Attn: Customer Service 333 East Wetmore Road, Tucson, AZ 85705 For complaint via phone call: 1-866-495-6738</p> <p style="text-align: center;"><u>United Healthcare Community Plan CRS</u> Attn: Customer Service 1 East Washington Street, Phoenix, AZ 85004 For complaint via phone call: 1-800-348-4058</p>
PHYSICAL HEALTH PLAN	AHCCCS
<p style="text-align: center;"><u>Comprehensive Medical Dental Program</u> dcs.az.gov Email: CMDPMemberServices@azdcs.gov Member Services: 602-351-2245 or 1-800-201-1795</p>	<p style="text-align: center;"><u>Clinical Resolution Unit</u> www.azahcccs.gov Email: DCS@azahcccs.gov Phone: 602-364-4558 In-State Toll Free: 1-800-867-5808</p>

Complaints about the denial, reduction, suspension, or termination of a covered service should be handled as an appeal if you get written notice from your AHCCCS health plan.

If an agency or specialist is unable to serve you, there are other providers who can meet your needs. Under no circumstances should you or your child be made to wait beyond AHCCCS Policy established timelines without being given other options. The Arizona Health Care Cost Containment System (AHCCCS) is committed to ensuring the availability of timely, quality behavioral health care. If you continue to have questions, or difficulties accessing services, please call AHCCCS Clinical Resolution Team at 602-364-4558 or 1-800-867-5808 or you may submit concerns about quality of care by email at CQM@azahcccs.gov.