



Member Grievance and Appeal Information

If a member is unhappy with the care or services received, the member should talk with his/her Care Team first. If the member does not want to talk with the Team or is unhappy with the Team's response, s/he can call a Member Rights Specialist. The Member Rights Specialist will inform the member about his/her rights, attempt to informally resolve the concerns, and if necessary, help file a grievance or an appeal. The Member Rights Specialist will work with the member throughout the entire grievance or appeal process to try to find a workable solution.

For assistance with the grievance and appeals process contact:

Community Care, Inc.
Member Rights Specialist
205 Bishop's Way
Brookfield, WI 53005
262-207-9325; toll free at 866-992-6600 x79325 or at
memberrights@communitycareinc.org
TTY: Wisconsin Relay System 711

Who can file a grievance or appeal on the member's behalf?

The member's authorized representative, such as a legal guardian or activated power of attorney for health care, can file a grievance or an appeal on the member's behalf. If given written permission by the member, the following people can also file a grievance or an appeal on the member's behalf:

- A family member
- A friend
- **A PROVIDER**

What is a grievance?

A grievance is a complaint expressing a member's dissatisfaction with Community Care, one of our providers or the quality of care or services.

What is an appeal?

An appeal is a request to review a decision made by Community Care. Members may file an appeal if Community Care reduces or terminates a service or denies payment for a service. For example, a member may file an appeal if his/her Team denies a requested service or support.

More information about grievances and appeals can be found in the member handbooks and in the *Notice of Action (NOA)* which is sent to the member.