

Coos Health & Wellness

Together, Inspiring Healthier Communities



How are we doing?

Grievance and Appeal Process

You have the right to file a grievance regarding any aspect of your treatment or care at Coos Health and Wellness. You also have a right to appeal any decision we make to terminate, suspend or reduce the care you have been receiving. We are also interested in receiving other feedback that will help us improve our services and provide more effective, responsive care. We will attempt to address your concern in the quickest manner and provide assurance that your grievance/ appeal/ feedback will in no way negatively impact your care.

Your Options:

1. You can discuss any concerns directly with your mental health provider. Often many problems can be resolved quickly this way. You can also request to talk to a supervisor or the Quality Assurance Manager if this would be more helpful at 541-266-6700.
2. You can fill out a written complaint/grievance form to be forwarded to the Quality Assurance Manager for review and resolution. Complaints can also be made anonymously, though doing so may restrict our ability to respond directly to you regarding a resolution or response.
3. Grievances can also be made directly to the Oregon Health Authority by calling 503-945-5763 or visit <http://www.oregon.gov/oha/amh/Pages/AMH-Complaint-Page.aspx>. OHA is responsible for the licensing and certification of Coos Health and Wellness.
4. Grievances can also be made to Disability Rights Oregon by calling 503-243-2081/800-452-1694 or visiting www.disabilityrightsoregon.org. Disability Rights Oregon is the Protection and Advocacy System for Oregon.
5. Individuals having Oregon Health Plan managed by a Coordinating Care Organization also have an ability to file a grievance or appeal with their assigned CCO. In the Coos area many individuals are covered by Western Oregon Advanced Health. Grievances to WOAHA can be made by calling 541-269-7400 or visiting www.woahcco.com.
6. Contact CHW's Quality Assurance manager for more information about your rights. Please see the other side of this notice for a complete copy of the Oregon Administrative Rules regarding grievances and appeals.

Grievances and Appeals

- (1) Any individual receiving services, or the parent or guardian of the individual receiving services, may file a grievance with the provider, the individual's managed care plan or the Division.
 - (2) For individuals whose services are funded by Medicaid, grievance and appeal procedures outlined in OAR 410-141-0260 through 410-141-0266, must be followed.
 - (3) For individuals whose services are not funded by Medicaid, providers must:
 - (a) Notify each individual, or guardian, of the grievance procedures by reviewing a written copy of the policy upon entry;
 - (b) Assist individuals and parents or guardians, as applicable, to understand and complete the grievance process; and notify them of the results and basis for the decision;
 - (c) Encourage and facilitate resolution of the grievance at the lowest possible level;
 - (d) Complete an investigation of any grievance within 30 calendar days;
 - (e) Implement a procedure for accepting, processing and responding to grievances including specific timelines for each;
 - (f) Designate a program staff person to receive and process the grievance;
 - (g) Document any action taken on a substantiated grievance within a timely manner; and
 - (h) Document receipt, investigation and action taken in response to the grievance.
 - (4) Grievance Process Notice. The provider must have a Grievance Process Notice, which must be posted in a conspicuous place stating the telephone number of:
 - (a) The Division;
 - (b) The CMHP;
 - (c) Disability Rights Oregon; and
 - (d) The applicable managed care organization.
 - (5) Expedited Grievances: In circumstances where the matter of the grievance is likely to cause harm to the individual before the grievance procedures outlined in these rules are completed, the individual, or guardian of the individual, may request an expedited review. The program administrator must review and respond in writing to the grievance within 48 hours of receipt of the grievance. The written response must include information about the appeal process.
 - (6) Retaliation: A grievant, witness or staff member of a provider must not be subject to retaliation by a provider for making a report or being interviewed about a grievance or being a witness. Retaliation may include, but is not limited to, dismissal or harassment, reduction in services, wages or benefits, or basing service or a performance review on the action.
 - (7) Immunity: The grievant is immune from any civil or criminal liability with respect to the making or content of a grievance made in good faith.
 - (8) Appeals: Individuals and their legal guardians, as applicable, must have the right to appeal entry, transfer and grievance decisions as follows:
 - (a) If the individual or guardian, if applicable, is not satisfied with the decision, the individual or guardian may file an appeal in writing within ten working days of the date of the program administrator's response to the grievance or notification of denial for services as applicable. The appeal must be submitted to the CMHP Director in the county where the provider is located or to the Division as applicable;
 - (b) If requested, program staff must be available to assist the individual;
 - (c) The CMHP Director or Division, must provide a written response within ten working days of the receipt of the appeal; and
 - (d) If the individual or guardian, if applicable, is not satisfied with the appeal decision, he or she may file a second appeal in writing within ten working days of the date of the written response to the Director.
- Stat. Auth.: ORS 161.390, 413.042, 430.256, 428.205 - 428.270, 430.640
Stats. Implemented: ORS 109.675, 161.390 - 161.400, 179.505, 413.520 - 413.522, 430.010, 430.205 - 430.210, 430.240 - 430.640, 430.850 - 430.955, 461.549, 743A.168, 813.010 - 813.052 & 813.200 - 813.270
Hist.: MHS 6-2013(Temp), f. 8-8-13, cert. ef. 8-9-13 thru 2-5-14; MHS 4-2014, f. & cert. ef. 2-3-14