



Principal Office: 5250 Lovers Lane, Portage, MI 49002

Phone: 800-676-0423

MAILING DATE

RE: **CMH GRIEVANCE/ISSUE**

Dear **CLIENT**

This letter is let you know the Grievance/Concern you shared with me regarding the **TYPE OF GRIEVANCE** you received from **CMH** was filed on **DATE**. Thank you for bringing your concern to my attention. A decision was made on **DATE** regarding the concern you brought to my attention. The following corrective action/resolution has occurred:

STATE THE CORRECTIVE ACTION PLAN HERE

This matter is considered closed at this time.

If you believe this decision was not made within 90 days of filing your Grievance/Concern, this would be considered an “action” and you may be entitled to formally “Appeal” to your local Community Mental Health provider.

If you have any questions or concerns regarding this decision or corrective action please feel free to contact your Regional Customer Service Representative at the contact information provided below.

Sincerely,

Ashley Esterline
Member Triage and Engagement Specialist
Southwest Michigan Behavioral Health
5250 Lovers Lane Suite 200
Portage, MI 49002
1-800-890-3712 |