



Member Grievance Form

Please complete this form and attach any related documents. Mail the form and documents to: **Attn: Grievance Department, Anthem Blue Cross, P.O. Box 60007, Los Angeles, CA 90060-0007.**

You may also file a grievance by calling the Customer Care Center at **800-407-4627 (TTY 711)** or **888-285-7801 (TTY 711)** in Los Angeles Monday to Friday, 7 a.m. to 7 p.m. Pacific time or by visiting **anthem.com/ca/medi-cal**. You will be sent a response within 30 calendar days of us receiving this form or your call.

Date: _____
Member name: _____ Member ID number/CIN number: _____
Address: _____
City: _____ State: _____ ZIP code: _____
Phone number: _____

Information about the Grievance

This information becomes part of the permanent record; write clearly.

Date of incident (MM/DD/YY): _____

Describe what happened (attach additional pages if necessary.) Be as specific as possible about what happened and who was involved:

Signature of member (parent or guardian if the member is a minor.)

X

Date:

If you need assistance with this form, please call the Customer Care Center phone number on your Anthem Blue Cross ID card. Please see the back of this form for more information.

Anthem Blue Cross is the trade name of Blue Cross of California. Anthem Blue Cross and Blue Cross of California Partnership Plan, Inc. are independent licensees of the Blue Cross Association. Anthem is a registered trademark of Anthem Insurance Companies, Inc. Blue Cross of California is contracted with L.A. Care Health Plan to provide Medi-Cal Managed Care services in Los Angeles County.

All Medi-Cal Members

You may ask for a State Fair Hearing within 120 days of the incident. Write to:

**California Department of Social
Services State Hearings Division
P.O. Box 944243, MS 9-17-37
Sacramento, CA 94244-2430**

You may call the Department of Social Services directly at **800-743-8525**. You may call the Office of the Ombudsman to assist you at **888-452-8609**.

Los Angeles County Medi-Cal Members

You may also contact the following:

**Attn: Member Services
L.A. Care Health
Plan 555 W. Fifth
Street
Los Angeles, CA 90013
888-285-7801**

You may call the Office of the Ombudsman to assist you at **888-452-8609**. You may also ask for a State Fair Hearing within 120 days of the incident. Write to:

**California Department of Social
Services State Hearings Division
P.O. Box 944243, Mail Station 9-17-37
Sacramento, CA 94244-2430**

You may call the Department of Social Services directly at **800-743-8525**.

Upon receipt, your request will be acknowledged, and you will receive further information regarding the arbitration process.

All Anthem Blue Cross Members

The California Department of Managed Health Care is responsible for regulating healthcare service plans. If you have a grievance against your health plan, you should first telephone your health plan at **800-407-4627 (TTY 711)** or **888-285-7801 (TTY 711)** in Los Angeles Monday to Friday, 7 a.m. to 7 p.m. Pacific time or visit **anthem.com/ca/medi-cal** and use your health plan's grievance process before contacting the department. Utilizing this grievance procedure does not prohibit any potential legal rights or remedies that may be available to you. If you need help with a grievance involving an emergency, a grievance that has not been satisfactory resolved by your health plan, or a grievance that has remained unresolved for more than 30 days, you may call the department for assistance. You may also be eligible for an Independent Medical Review (IMR). If you are eligible for IMR, the IMR process will provide an impartial review of medical decisions made by a health plan related to the medical necessity of a proposed service or treatment, coverage decisions for treatments that are experimental or investigational in nature, and payment disputes for emergency or urgent medical services. The department also has a toll-free telephone number **(1-888-466-2219)** and a TDD line **(1-877-688-9891)** for the hearing and speech impaired. The department's internet website **www.dmhca.gov** has complaint forms, IMR application forms and instructions online.