



Notice of Patient Complaint Process

Patients may report any concerns relating to Valle del Sol's provision or quality of care using the formal patient complaint process. Examples of patient complaints include but are not limited to:

- General concerns (quality of care or services)
- Environmental conditions (unsanitary practices, unclean facilities, safety hazards)
- Impoliteness or rudeness by Valle del Sol personnel

How Patients May File a Complaint

Patients may file complaints through any of the following methods:

- In writing (forms available at front desk)
- By phone, through the patient contact center
- By email to compliance@valledelsol.com

Staff must assist patients in filing complaints if requested, including providing interpretation services and physical assistance where needed.

SMI Complaints/Grievances: Any person may file an SMI grievance or request an investigation alleging that a rights violation or a condition requiring investigation has occurred or currently exists. The request may be verbal or written and must be initiated no later than one year after the date of the alleged rights violation or condition requiring investigation. Forms for filing are available at AHCCCS, the Arizona State Hospital, and at all clinic locations.

Allegations of rights violations by Valle del Sol or its providers or SMI grievances/requests for investigation related to physical or sexual abuse or death will be processed internally and sent to AHCCCS. Within 7 days of the date received, you will be sent an acknowledgment letter and, if appropriate, an investigator will be assigned to research the matter. When a decision is reached, you will receive a written response.

Information Collected

Complaint forms or documentation should include:

- Patient name and contact information (unless anonymous)
- Date and location of the incident
- Description of the complaint
- Staff involved, if known

- Requested resolution or concern

Initial Review and Acknowledgment

- All complaints must be forwarded to the **Compliance Officer** within **1 business day** of receipt.
- Patients will receive acknowledgment of their complaint within **3 business days**, either verbally or in writing.

Investigation and Resolution

- Investigations begin immediately upon receipt and may include interviews with staff, review of medical records, and consultation with leadership.
- Most complaints will be resolved within **15 business days**.
- Patients will receive a written or verbal response summarizing the outcome and any corrective actions taken.

Appeals

If a patient is unsatisfied with the result of a complaint filed with Valle del Sol, the patient may appeal the decision by submitting a written request for appeal to the Compliance Officer via email at compliance@valledelsol.com. Valle del Sol will attempt to resolve all appeals within seven days through an informal process. If the problem cannot be resolved, the matter will be forwarded for further review.

Continued Services During Appeal

Members currently receiving services or benefits may be able to continue to receive them during the appeal process. If services were reduced, suspended or terminated, a request to continue receiving services during the appeal may be made. The appeal must be filed before the day the reduction, suspension or termination is to take effect. If there is less than 10 days between the notice date and the effective date on the notice, the request for continued services must be filed within 10 days from the notice date. If the appeal is denied, the member may have to pay for the services received during the appeal process.

SMI Appeal

Any person, age 18 or older, his or her guardian, or designated representative, may file an appeal related to services applied for, or services the person is receiving. Matters of appeal are generally related to: a denial of services; disagreement with the findings of an evaluation or assessment; any part of the Individual Service Plan; the Individual Treatment and Discharge Plan; recommended services or actual services provided; barriers or unreasonable delay in accessing services under Title XIX; and fee assessments. Appeals must be filed with Valle del Sol and must be initiated no later than 60 days after the decision or action being appealed. Appeal forms are available at AHCCCS, via compliance@valledelsol.com, and at all clinic sites. If Valle del Sol does not accept the appeal or dismisses your appeal without consideration of the merits, patients may request an Administrative Review by AHCCCS of that decision.

For SMI grievances/requests for investigation and appeals, to the greatest extent possible, please include:

1. Name of person filing the SMI grievance/request for investigation or appeal
2. Name of the person receiving services, if different.
3. Mailing address and phone number.
4. Date of issue being appealed or incident requiring investigation.
5. Brief description of issue or incident.
6. Resolution or solution desired.
6. Escalation and External Support

Further Escalation Options

If a patient is not satisfied with the resolution of an appeal, or wishes to escalate concerns beyond the health center, they may contact the **Arizona Department of Health Services (ADHS) Office of Customer Service:**

ADHS Patient Complaint Resource Contact:

- **Online Complaint Form:** <https://www.azdhs.gov/licensing/index.php#complaint-forms>
- **Phone:** (602) 364-2536
- **Mail:** Bureau of Medical Facilities Licensing, 150 North 18th Avenue, Suite 450, Phoenix, AZ 85007

Patients may also contact:

- **Office for Civil Rights (OCR)** for HIPAA violations
- **HRSA Health Center Complaint Portal**
- **Arizona Health Care Cost Containment System (AHCCCS)** if enrolled in Medicaid

Information about external resources must be posted in visible locations in the clinic and included in the Patient Rights & Responsibilities brochure.

For further information, contact the health plan or call the Office of Administrative Legal Services.

- Members not enrolled in an AHCCCS Health Plan, including those who receive benefits through fee-for-service and/or those enrolled in the American Indian Health Plan (AIHP), have the right to file a grievance, make a complaint, or file an appeal. Call: Maricopa County at 602-417-4232 for more information.

Confidentiality

All patient complaints are confidential.

Non-Retaliation

Patients who file complaints will not be denied care or otherwise penalized. Retaliation of any kind by staff is strictly prohibited and subject to disciplinary action.

Patient Acknowledgement:

I acknowledge that I have received information about the patient complaint process.

Patient Name: _____

Signature: _____ Date: ____/____/____