



## MEMBER GRIEVANCE FORM

DATE GREIVANCE FILED: \_\_\_\_\_ EON HEALTH ID#: \_\_\_\_\_

MEMBER NAME: \_\_\_\_\_ MEMBER PHONE #: \_\_\_\_\_

MEMBER ADDRESS: \_\_\_\_\_

NAME OF PERSON FILING THE GRIEVANCE & RELATIONSHIP TO MEMBER:

\_\_\_\_\_ PERSON FILING'S PHONE #: \_\_\_\_\_

PERSON FILING'S ADDRESS: \_\_\_\_\_

### **What is the Grievance about?**

*Please be specific and include as much information as possible, such as dates of service, the name and location of the provider, and the type of service at issue. (who, what, where, when, why)*

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### **What would you like as a result of filing this Grievance?**

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Eon Health has a contract with Medicare to offer HMO and PPO plans. Eon Health also has a contract with the Georgia Medicaid Program and a contract with the South Carolina Medicaid program. Enrollment in Eon Health depends on contract renewal.

**Your rights during the grievance process:**

- You (or your representative) have the right to submit evidence or allegations of fact or law, in person or in writing.
- You (or your representative) have the right to review any information related to your grievance.
- You (or your representative) have the right to have an Eon Health staff member help you through the Grievance process.

**These Rights have been explained by:**

**Date:**

Please review the information on this form to be sure that your Grievance is correct. You may make any corrections that you feel are needed. You may provide additional information for review.

**Please sign this form and return it in the enclosed postage paid envelope or fax 1-866-235-5181.**

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**Signature**

**Date**

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**Printed Name**

PLEASE NOTE: If anyone other than the member has completed and signed this form, a completed Appointment of Representation Form (AOR), or Equivalent Written Notice must be provided to Eon Health before this Grievance may be investigated. You may obtain a copy of the AOR from our website ([www.eonhealthplan.com](http://www.eonhealthplan.com)) or by calling our Member Services Department at 1-888-906-3889. Eon Health Member Services Department hours of operation are:

- October 1 through February 14: 8:00 a.m. to 8:00 p.m., 7 days a week.
- February 15 through September 30: Monday through Friday 8:00 a.m. to 8:00 p.m.
- You may leave a voice mail message after-hours, Saturdays, Sundays and holidays.

*Internal Use Only*

- All Fields Complete
- Spell Check
- Submit Form

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