

Can anyone help me with my appeal or grievance?

Yes. You may receive help from:

- A lawyer;
- Relative;
- Guardian; or
- Friend, or other person you know.

You may also contact:

- The Legal Aid Office; or
- The local Hawaii Disability Rights Center



## Case Management Branch

### Mission Statement

Foster partnerships and provide quality person-centered and family-focused services and supports that promote self-determination

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We provide access to our activities without regard to race, color, national origin (including language), age, sex, religion, or disability.

Write or call our Affirmative Action Officer at P.O. Box 3378, Honolulu, HI 96801-3378 or at (808) 586-4616 (voice) within 180 days of a problem.

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Case Manager: \_\_\_\_\_

Phone #: \_\_\_\_\_

March 2016

# Grievance and Appeals



Hawaii State Department of Health  
Developmental Disabilities Division

Are you unhappy with or have been denied a service?



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You may request to have your appeal heard through an informal or formal process.

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You should be prepared to talk about:

- What your appeal is about;
  - Why you do not agree with a decision.
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## Informal Appeals

You may request an informal appeal by contacting any of the following people:

- Your Case Manager;
  - Your Case Manager's Supervisor;
  - Your Case Management Section Supervisor (East at 733-9172 or West at 453-6105);
  - The Case Management Branch Chief at 733-9172; or
  - The Developmental Disabilities Administrator at 586-5840.
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For Neighbor Islands you may contact:

- Your Case Manager;
- Your Case Manager's Supervisor;
  - East Hawaii . . . . . 974-4280
  - West Hawaii . . . . . 322-1906
  - North Hawaii . . . . . 887-6069
  - Kauai . . . . . 241-3406
  - Maui/Lanai . . . . . 984-8250
  - Molokai . . . . . 553-3200
- Your District Health Officer; or
- The Developmental Disabilities Division Chief at 586-5840.

## Formal Hearing

- Your formal hearing must be in writing.
  - You must send your formal hearing explaining why you do not agree with the action.
  - Send your formal appeal to:
    - The Department of Health
    - Director of Health
    - P.O. Box 3378
    - Honolulu, HI 96801
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If your concern is about a *Medicaid waiver service* you may also send your formal appeal to:

- The Department of Health  
Director of Health  
P.O. Box 3378  
Honolulu, HI 96801  
*and/or*
- The Department of  
Human Services  
Administrative  
Appeals Officer  
P.O. Box 339  
Honolulu, HI 96809