



## Corporate Compliance Complaint

**INSTRUCTIONS:**

This form may be used to report any Corporate Compliance Complaint involving Sanilac CMH or its Network Providers. Complaints may be submitted to the Sanilac CMH Compliance Office by phone at (810) 648-0330, in person or by mailing to Sanilac CMH Compliance Office at 227 E. Sanilac Avenue, Sandusky MI 48471. Additional contact information found at [www.sanilaccmh.org](http://www.sanilaccmh.org). Complaints may be submitted anonymously. The Sanilac CMH Compliance Office will review the complaint and may conduct an investigation.

Name of Person/Agency alleged in Non-Compliance:

Date of Event/Action:

Address of Person/Agency alleged in Non-Compliance:

Date of Complaint:

Complainant's Name (Not Required):

Complainant's Phone Number and/or Email Address (Not Required):

Describe the type of alleged non-compliance (Illegal or Improper Conduct, Policy Violation, Health Insurance Portability and Accountability Act (HIPAA) Privacy or Security Violation, Medicaid Fraud, Waste or Abuse or Other):

Description of Event/Action (attach additional pages as necessary):