



BlueMedicare Preferred HMO
Member Grievance and Appeal Form

Mail to:
Florida Blue Preferred HMO
PO Box 14010
Orange, CA 92863-9936
Attn: Member Grievances & Appeals
Fax: 1-323-201-5690

Please read and sign the statement below. You may mail or fax it to the address/fax number provided above.

I hereby request a review of the Grievance or Appeal described below and understand that the receipt of this Grievance and Appeal Form by Florida Blue Preferred HMO constitutes a request for review by the Local Office. I understand that in order for Florida Blue Preferred HMO to review my Grievance or Appeal, Florida Blue Preferred HMO may need medical or other records for information relevant to my Grievance or Appeal. Accordingly, I authorize those persons or entities that have any medical or other records or knowledge of me to release such information to Florida Blue Preferred HMO in order for Florida Blue Preferred HMO to complete its review of my Grievance or Appeal.

Date:	Individual's Signature:
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PLEASE PRINT CLEARLY AND COMPLETE ALL OF THE INFORMATION REQUESTED BELOW:

Individual Name:	ID Card Number:
Address:	City:
Zip:	County:
Day Phone:	Employer (if applicable):

Date of Service (if applicable):

Condition/Diagnosis (if applicable):

Please describe the nature of your Grievance or Appeal and any facts you feel should be considered in the review of your Grievance or Appeal:

(Use additional sheets if necessary)

If the problem involves unpaid bills, please attach a copy of the bill(s) or a completed claim form. If you have any questions, please contact our Member Services number at 1-844-783-5189 for information. (TTY users should call 1-800-955-8770). Our Member Services Department is open from 8:00 a.m. – 8:00 p.m. local time, seven days a week.. We have free language interpreter services available for non-English speakers. A Member Services Representative will be happy to assist you.

Florida Blue Preferred HMO is an HMO plan with a Medicare contract. Enrollment in Florida Blue Preferred HMO depends on contract renewal.