Grievance, Reconsideration, and Appeal Request Form

Please use this form to file a grievance, reconsideration, or appeal related to your CHRISTUS Health US Family Health Plan.

Beneficiary Information

Beneficiary name ______________________________

CHRISTUS Health US Family Health Plan ID number ______________________________

Date of birth (MM/DD/YYY) ______________________________

Home phone ______________________________ Cell phone ______________________________

Address ______________________________

City ______________________________ State __________ Zip code ______________

Authorized Representative* ______________________________

*An Appointment of Representative form or written equivalent is required when someone files an appeal or grievance on behalf of a member. Link to CMS-1696 Appointment of Representative form is below.

Appointment of Representative form - English   Appointment of Representative form - Spanish

Grievance / Reconsideration / Appeal Information

Claim number ______________________________

Date(s) of service ______________________________

Name of provider ______________________________

Please explain your grievance, reconsideration, or appeal. You can attach extra information to support your grievance, reconsideration, or appeal. ______________________________

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Signature of Beneficiary or Representative   Date

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Relationship to Beneficiary (if Representative)

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Grievance, Reconsideration, and Appeal Request Form

Mail this form to the following address for a timely appeal/grievance resolution:

US Family Health Plan

Complaint, Appeal, and Grievance Department
PO Box 169009
Irving, TX 75016
Fax# 1-866-416-2840

If you have any questions, please contact Member Services at 1-800-678-7347, TTY 711. We are open Monday through Friday from 8:00 a.m. to 5:00 p.m. CST. Our automated phone system will answer your call after 5:00 p.m. on weekdays, on Saturdays and Sundays, and federal holidays. Please leave your name and telephone number and we will call you back by the end of the next business day.