



GOGEBIC
Community Mental Health

103 West U.S. 2
Wakefield, MI 49968
Administration Department: (906) 229-6100
Outpatient Department: (906) 229-6120
Crisis Line: (800) 348-0032
Administration Fax: (906) 224-1272
Protected Health Info Fax: (906) 229-6191
Website: www.gccmh.org

**GOGEBIC COMMUNITY MENTAL HEALTH AUTHORITY
PROVIDER APPEAL/DISPUTE RESOLUTION REQUEST**

Send form via mail, email, or fax to: **Melissa Hall, Chief Executive Officer, Gogebic CMHA,**
103 West U.S. 2, Wakefield, MI 49968; e-mail: mhall@gccmh.org; Fax: 906-229-6190

Request for: Level-one Review Level-two Review

Provider Name:	Date Requesting Appeal:
Date Notified of Gogebic CMHA's Participation Decision:	
Provider Grievance/Reason for Dispute	
Additional Information	

Please attach any relevant supporting documentation.

Provider Signature: _____

For Office Use Only:

Date Request Received:	Date of Review:
Date of Response to Provider:	
Findings/Outcome:	