

MACOMB COUNTY COMMUNITY MENTAL HEALTH SERVICES
Request for a Second Opinion on Denial of
Inpatient Psychiatric Services

If you are requesting inpatient psychiatric admission, and your request is denied, you may request a Second Opinion. A Second Opinion is a review of the decision made. Usually, a Second Opinion is provided by the MCCMH Executive Director, the Medical Director, or by designee. Second Opinions must be completed within three business days or less for hospitalization. You must request a Second Opinion in writing.

Contact the MCCMH Office of Community Relations (586) 469-7795 V;
MI Relay Center (800) 649-3777 TTY.

(Print Name of Individual Clearly)

Guardian (Print Clearly)

Address

Address

() _____
Telephone Number

() _____
Telephone Number

I (my Guardian) requests a Second Opinion from MCCMH on denial of inpatient psychiatric services.

Signature

- Self or
- Guardian

Date: _____

Hand deliver, fax (586) 469-7674, or mail form to Macomb County
Community Mental Health, 22550 Hall Road, Clinton Township, MI 48036