

OAC 310:678-5-1 requires the administrator of each facility and provider agency covered by the Office of Client Advocacy (OCA) grievance rules to provide OCA with information regarding their local grievance coordinator (LGC). This form can be mailed to the address below or sent via email to oca.grievances@health.ok.gov.

Notify OCA immediately of any change to the designated LGC.

If you have any questions, please contact OCA's grievance supervisor at 405 522-2720 or via email address above.

Agency name _____ Date _____

Street address _____ City _____ State _____ ZIP code _____

Person submitting form _____

Title _____

DESIGNATED LGC

Name _____ Date appointed LGC _____

Title _____

Business phone number _____ Cell phone _____ Pager _____

Email _____

Mail to: Attn: Grievance Unit
Oklahoma State Department of Health
Office of Client Advocacy
123 Robert S. Kerr Ave., Suite 1702
Oklahoma City, OK 73102-6406