

GRIEVANCE PROCEDURE:

Patients receive a patient satisfaction survey giving the patient the opportunity to share comments regarding their care at the Surgery Center. If a patient would like to file a formal complaint, he/she can do so by forwarding a written explanation of the grievance to the address provided below. The patient may also access the Office for Civil Rights at www.hhs.gov/ocr/filing-with-ocr/index.html. If you have questions regarding the Surgery Center grievance policy please contact Mason City Surgery Center's Administrator.

Administrator
Mason City Surgery Center
990 4th Street SW, Mason City, Iowa 50401
(641)-494-2000

U.S. Department of Health and Human Services
200 Independence Ave SW, Washington, D.C. 20201
(800)-368-1019
TTD: (800)-537-7697