



[Appeal and Grievance Information Medicare Part C \(Medical Care\)](#)

[Appeal and Grievance Information Medicare Part D \(Prescription Drug\)](#)

To obtain information about the number of appeals, grievances, and exceptions filed with AvMed Medicare, please contact us at:

**AvMed Medicare**

Appeals and Grievances Department  
PO Box 569008  
Miami, FL 33256

Phone:

1-800-782-8633

TTY Users can call 711

Fax:

(305) 671-4736

***Medicare Complaint Form***

You are now able to submit your feedback about your Medicare coverage or other non-urgent issue by accessing the link below and completing the form:

<https://www.medicare.gov/MedicareComplaintForm/home.aspx>

The Office of the Medicare Ombudsman (OMO) helps you with complaints, grievances, and information requests. You may reach the Medicare Ombudsman by clicking on this link:

<https://www.cms.gov/center/special-topic/ombudsman/medicare-beneficiary-ombudsman-home>