

GROUPS WHO OFFER SUPPORT

- φ Disability Rights North Carolina
877-235-4210
888-268-5535 (TTY)
- φ The National Alliance for the Mentally Ill
in North Carolina
(800)451-9682
- φ The North Carolina Mental Health Consumers' Organization, Inc.
(800)326-3842
- φ Alcohol/Drug Council of North Carolina
(800)688-4232
- φ NC CareLine—800-662-7030

Please visit www.srmh.org
for a Community Resource
Directory which lists natural
and community supports
found in Bladen, Columbus,
Robeson, and Scotland counties.

Contact Your Local Management Entity



CREDIBILITY • INTEGRITY • ACHIEVEMENT

**SOUTHEASTERN REGIONAL
MENTAL HEALTH
DEVELOPMENTAL DISABILITIES
AND SUBSTANCE ABUSE
SERVICES**

1800-760-1238
910-738-5261
910-738-8230 (fax)
450 Country Club Road
Lumberton, NC 28360

**SOUTHEASTERN REGIONAL MENTAL HEALTH
DEVELOPMENTAL DISABILITIES AND
SUBSTANCE ABUSE SERVICES**

NON-MEDICAID APPEAL RIGHTS

*Learn about your
rights to appeal a
denial or change in
non-Medicaid funded
mental health,
developmental
disabilities and
substance abuse*

1-800-760-1238

NORTH CAROLINA PROGRAMS RULES AND NON-MEDICAID RIGHTS

Effective October 1, 2006, the Commission for Mental Health, Developmental Disabilities and Substance Abuse Services adopted rule NCGS 143-B147(a) 10.35.(a) for non-Medicaid consumers.

Southeastern Regional Mental Health, Developmental Disabilities and Substance Abuse Services is a Local Management Entity (LME) responsible for monitoring and oversight of all behavioral health care services within Bladen, Columbus, Robeson, and Scotland County.

For non-Medicaid funded behavioral health services, the LME has the responsibility to evaluate your treatment needs. Sometimes, evaluations show that a person who requests a specific service may not benefit from or qualify for that service. Sometimes, evaluations show that a person who is receiving services may no longer need that service or amount of service.

You have the right to disagree with and appeal the LME clinical decision to:

- φ Deny your request for services; and/or
- φ Reduce, suspend or terminate a non-Medicaid funded services) you are currently receiving

When the LME makes a clinical decision to deny, reduce, suspend or terminate your non-Medicaid funded service: we must inform you in writing.

The letter must contain:

- φ The reason for the LME decision
- φ Available options
- φ The laws that support your appeal rights, and
- φ The appeal steps and deadlines.
- φ This notification will be mailed the next work day following the LME decision.



450 Country Club Road
Lumberton, NC 28360
Phone: 910-272-1257
Fax: 910-738-8230
E-mail: info@srmhc.org

HOW DO I FILE AN APPEAL?

1. Complete the appeal request form attached to the notification letter sent by the LME. Follow instructions. It must be filed only by a client or legal representative.
2. File your appeal by the appropriate deadline.
3. The LME must receive the appeal request form in writing within 15 working days of the notification letter
4. The LME shall acknowledge receipt of your appeal in writing the next working day after receipt of the appeal request form.
5. The LME shall schedule a 2nd clinical review by an employee not involved in the first decision.
6. The clinical review shall uphold (agree) or overturn (disagree) the original decision
7. The LME shall notify you of the clinical review decision within seven working days from receipt of the appeal request form.
8. If the clinical review overturns the initial decision, the letter shall state the date which service shall be reinstated
9. If the clinical review upholds the previous decision, the letter shall state the right to appeal to the State Division of non-Medicaid Appeal Panel.