

**NON-MEDICAID APPEAL REQUEST FORM**

Please provide the information below to request a Non-Medicaid hearing, in Raleigh, with the Division of Mental Health, Developmental Disabilities and Substance Abuse Services (DMH/DD/SAS).

**\*\*\*Mail or fax this form to: MMH/DD/SAS Hearing Office  
c/o Customer Service and Community Rights  
Mail Service Center 3009, Raleigh, NC 27699-3099  
Phone: 919-715-3197 Fax: 919-733-4962**

This form must be received no later than eleven (11) days from the date of the enclosed notice. Please complete the following and attach a copy of the LME decision letter when sending this request.

Consumer's Name: \_\_\_\_\_

Consumer's Date of Birth: \_\_\_\_\_

Consumer's Address: \_\_\_\_\_

\_\_\_\_\_

Mental Health Partners                      1985 Tate Blvd. SE Suite 529, Hickory, NC 28602                      828-327-2595

I would like to appeal the decision regarding the following service: \_\_\_\_\_

\_\_\_\_\_. Please be very specific.

\_\_\_\_\_

Signature of Non-Medicaid Consumer, Parent, Guardian or Legally Responsible Person

Date

Relationship to Consumer: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Telephone Numbers: \_\_\_\_\_ (day) \_\_\_\_\_ (evening)

Complete the next section only if you have a lawyer or other representative to assist you with this appeal.

*“I authorize the following individual to represent the above Consumer. Upon request, I authorize DMH/DD/SAS to release any and all medical records and other documents and confidential information which may pertain to the Non-Medicaid hearing process.”*

Relationship to Consumer: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Telephone Numbers: \_\_\_\_\_ (day) \_\_\_\_\_ (evening)

\_\_\_\_\_

Signature of Non-Medicaid Consumer, Parent, Guardian or Legally Responsible Person

Date

If you have questions about the appeal process, you may call DMH/DD/SAS Customer Service and Community Rights at 919-715-3197 or CARE-LINE toll-free at 1-800-66-7030 or TTY 1-877-452-2514.

***This appeal does not create an entitlement to mental health, developmental disabilities and substance abuse services. Neither the Division panel decision nor the LME Director’s final decision is considered a final agency decision in accordance with NCGS 150B. Non-Medicaid eligible Consumers do not have the right to a contested case hearing pursuant to NCGS 150B.***