

Questions? Go to <u>ncmedicaidplans.gov</u>. Or call us toll free at **1-833-870-5500** (TTY: 711 or RelayNC.com). We can speak with you in other languages.

AUSTIN POTTER 910 E MAIN ST DURHAM NC 27701 0000 August 30, 2025

Dear AUSTIN POTTER:

On August 28, 2025, we were unable to contact you. You asked to change the health plan for the member below, and the request is **denied**.

Name	ID number
AUSTIN POTTER	XXXXXXXXXX

The request is denied since you mailed or faxed an enrollment form indicating that you would like to change AUSTIN POTTER's health plan, but the Enrollment Broker has not been able to reach you to complete the informed consent process. This includes both choice counseling and your acknowledgment prior to completing your request.

The decision is effective August 30, 2025.

Authority supporting this decision:

42 C.F.R. § 438.56

N.C.G.S. § 108D-40(a)(12)

N.C.G.S. § 108D-60(10)

Article 1A of Chapter 108D of the NC General Statutes

What happens next?

AUSTIN POTTER will remain in their current health plan and continue to get services as they do today. If they would still like to change from their current health plan, contact the Enrollment Broker toll free at **1-833-870-5500** to complete the informed consent process.

More on back ▶

You can get free auxiliary aids and services, including information in other languages or formats such as large print or audio. Call us toll free at **1-833-870-5500**.

If AUSTIN POTTER does not agree with the decision

AUSTIN POTTER has 30 calendar days from the date listed on page 1 of this letter to ask for an appeal. The last day to ask for an appeal is September 29, 2025. Instructions on how to file an appeal came with this letter.

If AUSTIN POTTER thinks their health is at serious risk because of this decision, they can ask for a faster (expedited) appeal. The State Fair Hearing Request Form that came with this letter says how to ask for a faster appeal.

Questions?

The NC Medicaid Ombudsman can offer help if you cannot get access to health care. They can connect you to other resources and help you understand your rights and responsibilities.

Go to <u>ncmedicaidombudsman.org</u>. Or call toll free at **1-877-201-3750**, 8 a.m. to 5 p.m., Monday through Friday.

Thank you,

NC Medicaid Team

