

## MANAGED CARE APPEALS

Managed care appeals are available when a Medicaid beneficiary's health care plan denies, suspends, or stops some or all of a service that they request. By assisting beneficiaries navigate the appeal process, legal volunteers increase the opportunity for beneficiaries to receive services to which they are entitled. Appeals may often be resolved remotely through mediation in the Office of Administrative Hearings.

## PRO BONO EXPECTATIONS:

The Advocacy Center staff refer eligible clients. Pro bono volunteer meets with client to discuss their case. Volunteer files petition to appeal client's denial of coverage and represents client remotely in mediation (and potentially remote hearing) with Manage Care Organization.

Time Commitment: About 10 hours per case (without hearing), about 20-30 hours per case (with hearing)

## PRO BONO IMPACT:

North Carolina is undergoing a massive change in its Medicaid system as it transitions from a fee-for-service system to managed care. This will impact over 2 million individuals in North Carolina who receive Medicaid. As a pro bono volunteer, you can empower some of North Carolina's most marginalized and low-income residents to navigate a complex change and preserve their rights and access to health care.

## TRAINING + SUPPORT

We offer trainings to legal volunteers outside of their practice area. We also provide a tool kit with the necessary materials to take the case. The Advocacy Center staff provide ongoing assistance, including revision of all advice letters. Co-counsel is welcome and encouraged!



**Consuela, Family Support and Healthcare Client**

## YOU WOULD ENJOY MANAGED CARE APPEALS IF:

- You want to work directly with clients.
- You want to volunteer but have limited or inconsistent time to do so.
- You prefer remote pro bono opportunities.
- You are interested in current changes in healthcare policy in NC.

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PRO BONO PARTNERS