



3.1 MILLION HEALTH PLAN MEMBERS ASSISTED

The DMHC Help Center protects health plan member rights, resolves member complaints, and helps members navigate and understand their coverage ensuring access to health care services.



\$198.4 MILLION

dollars assessed against health plans that violated the law



30.2 MILLION

Californians' health care rights are protected by the DMHC

97%

of state-regulated commercial and public health plan enrollment is regulated by the DMHC



Approximately 73%

of health plan member appeals (IMRs) to the DMHC resulted in the health plan member receiving the requested service or treatment from their health plan



\$296.1 MILLION

dollars saved on Health Plan Premiums through the Rate Review Program since 2011



\$62.2 MILLION

dollars recovered from health plans on behalf of health plan members



140 LICENSED HEALTH PLANS

98 FULL SERVICE



42 SPECIALIZED



\$227.1 MILLION

dollars in payments recovered to physicians and hospitals

KNOW YOUR HEALTH CARE RIGHTS

In California, health plan members have the right to:

- basic health care services
- choose your primary doctor
- an appointment when you need one (timely access to care)
- see a specialist when medically necessary
- receive treatment for all behavioral health conditions (mental health/substance use)
- get a second doctor's opinion
- know why your plan denies a service or treatment
- understand your health problems and treatments
- know your out-of-pocket costs & if you met your deductible or out-of-pocket max
- see a written diagnosis (description of your health problem)
- give informed consent for treatment
- file a complaint or ask for an Independent Medical Review (an external appeal of your plan's denial of services or treatment)
- a copy of your medical records (you may be charged)
- translation and interpreter services
- continue to see your doctor, even if they no longer participate in your plan (under certain circumstances)
- be notified of an unreasonable rate increase
- not be illegally balance billed by a health care provider
- not be excluded from health plan coverage because of a pre-existing condition
- guaranteed availability to renew or purchase commercial health plan coverage

The California Department of Managed Health Care protects consumers' health care rights and ensures a stable health care delivery system.

How can you get help from the DMHC?

The DMHC protects you by making sure your health plan follows the law.

Most people who live in California are enrolled in a health plan regulated by the DMHC. Because of this, the DMHC Help Center is a good place to start if you have a problem with your health plan.

The DMHC Help Center assists health plan members with understanding their health care rights, coverage and benefits and resolving issues between members and health plans.

If you have an issue with your health plan, you should file a grievance with your plan. If you are not satisfied with your health plan's resolution of the grievance or have been in your plan's grievance system for 30 days for non-urgent issues, you should contact the DMHC Help Center for assistance. If your issue is urgent, you should contact the DMHC Help Center immediately.

The DMHC Help Center provides help in all languages.

Help is available by calling 1-888-466-2219 (TDD: 1-877-688-9891) or at www.DMHC.ca.gov. ALL SERVICES ARE FREE.

