DEPARTMENT OF
Managed Health Care

2025
25 years of protecting health care rights

3.2 MILLION
HEALTH PLAN MEMBERS ASSISTED
The DMHC Help Center educates health plan members about their health care rights and ensures their rights are protected. This is accomplished by helping health plan members resolve complaints against their health plan, including coverage disputes, billing issues and access to health care services.

30.2 MILLION
Californians' health care rights are protected by the DMHC

139
LICENSED HEALTH PLANS
- 98 FULL SERVICE
- 41 SPECIALIZED

96% of state-regulated commercial and public health plan enrollment is regulated by the DMHC

$296.1 MILLION
saved on Health Plan Premiums through the Rate Review Program since 2011

$73.9 MILLION
recovered from health plans on behalf of health plan members

78% 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

$259.3 MILLION
in payments recovered to physicians and hospitals

$214.3 MILLION
in fines assessed against health plans for violating the law

KNOW YOUR HEALTH CARE RIGHTS

DEPARTMENT OF Managed Health Care

In California, health plan members have the right to:

- basic health care services
- give informed consent for treatment
- 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)
- accurate provider directories from your health plan
- file a complaint or ask for an Independent Medical Review (an appeal of your health plan's denial of services or treatment through an independent process)
- 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
- fertility & infertility coverage (large employer plans must cover diagnosis and treatment, including in vitro fertilization (IVF)

The mission of the Department of Managed Health Care (DMHC) is to ensure health plan members have access to equitable, high-quality, timely, and affordable health care within 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. The DMHC Help Center is a good place to start if you have a problem with your health plan.

If you have an issue with your health plan, you should file a complaint, also called a grievance or appeal, with your plan. If you do not agree with your plan's response or your plan takes more than 30 days to respond to your complaint, you can contact the DMHC Help Center. If the issue is urgent, you should contact the DMHC Help Center immediately.

The DMHC Help Center provides assistance in all languages, and services are provided at no cost to health plan members. Go to **www.DMHC.ca.gov** or call **1-888-466-2219 (TDD: 1-877-688-9891)**.