

DMHC Newsletter

Protecting consumers' health care rights and ensuring a stable health care delivery system



Message from the Director



May is Mental Health Awareness Month, and the Department of Managed Health Care (DMHC) is working with our sister state agencies and departments to raise awareness about the importance of mental health.

As part of this effort, the DMHC has been working to raise awareness about behavioral health care coverage requirements. Commercial health plans are required to provide care for all medically necessary mental health and substance use disorder conditions. You can find more information about health plan behavioral health coverage requirements in the Department's [Know Your Health Care Rights Fact Sheet](#).

It is also important to acknowledge the mental health impacts COVID-19 has had on our lives over the last few years. Many Californians are struggling with increased stress, anxiety, depression, and other mental health impacts as a result of the uncertainty and changes spurred by the COVID-19 pandemic. As a result, the need for behavioral health care services has never been greater.

One of my highest priorities as Director of the DMHC is to make sure health plan enrollees can access appropriate behavioral health care services when they need them. As part of this effort, the Department is continuing to conduct focused Behavioral Health Investigations (BHIs) of all full-service, commercial health plans to evaluate if enrollees have consistent access to medically necessary behavioral health care services. The BHIs will be critical to better understanding the systemic barriers consumers face with accessing behavioral health care.

I also want to highlight some of the work the DMHC has been focused on over the past several months in addition to conducting the BHIs. In March, the Department took historic enforcement action against Local Initiative Health Authority for Los Angeles County (L.A. Care Health Plan) to protect the plan's members. The DMHC conducted coordinated investigations with the Department of Health Care Services (DHCS) finding several violations by the state's largest Medi-Cal plan, which are detailed further in the article below in this newsletter.

The Department established a Health Equity and Quality Committee earlier this year, and convened the first meeting in February. The Committee has held several meetings since, and I am

excited to see the Committee's recommendations in the Fall. In the meantime, the DMHC will continue to focus on ensuring access to quality health care for all Californians.

The DMHC Help Center is a valuable resource to assist health care consumers in resolving issues with their health plans. If you are having a problem with your health plan, including getting access to care or are being denied treatment, I encourage you to first contact your health plan to file a grievance. If you are dissatisfied with your health plan's response, or if your health plan does not resolve the issue within 30 days for non-urgent issues, contact the DMHC Help Center for assistance at 1-888-466-2219 or www.HealthHelp.ca.gov. If you have an urgent health issue, please contact the DMHC Help Center immediately.

Thank you for your support and continued interest in the DMHC.

Sincerely,

Mary Watanabe

Director
California Department of Managed Health Care

Tools and Resources to Prioritize Mental Health

With the recognition of Mental Health Awareness Month in May and Children's Mental Health Awareness Week earlier this month, the California Health and Human Services Agency (CalHHS) and the DMHC want to provide you with information, resources, and other opportunities to support the mental health and well-being of children, youth and families now and into the future.

CalHHS launched the [Mental Health Resources for Youth Webpage](#), an online resource hub that provides important information, resources, and tools for youth, families, schools and teachers.

The resource hub includes phone numbers and links to hotlines like the Suicide Prevention Lifeline, CalHOPE, Youth Crisis Line, LGBT Youth Talkline and more for people needing immediate support during a crisis. Tips and resources are provided to help families recognize the warning signs of suicide, depression and anxiety, as well as guides to help parents and teachers talk about mental health.

Additionally, the resource hub provides mindfulness activities in the form of videos and tips through its [Wellness Wednesday](#) section to help children manage stress. Activities like breathing exercises, meditation and grounding techniques are proven tools to support children, youth and adults. You can view more [Wellness Wednesday videos here](#), or visit the [CalHHS YouTube channel](#).

Reducing the stigma around mental health is critical to supporting families and ensuring they have the opportunity to access help when it's needed. We can all do our part to get informed, share resources and support our loved ones. For more information and support, you can visit the [Mental Health Resources for Youth Webpage](#) and share it with your friends and family.

Timely Access to Care

Health plans must provide enrollees with timely access to care, including an appointment within a specific number of days or hours. A new timely access to care requirement for follow-up behavioral health appointments will take effect on July 1, 2022 under Senate Bill (SB) 221 (Wiener, 2021). Health plans must provide non-urgent follow-up appointments with non-physician mental health care or substance use disorder providers within 10 business days of the prior appointment for those undergoing a course of treatment for an ongoing mental health or substance use disorder condition.

A qualified health care provider may extend the waiting time for an appointment if they determine a longer waiting time will not be harmful to the enrollee's health.

Timely Access to Care Standards



For more information, please see the [DMHC's Know Your Health Care Rights Fact Sheet](#).

State Fines L.A. Care Health Plan \$55 Million

The DMHC and DHCS took enforcement action against L.A. Care Health Plan to protect the plan's members. The actions against the state's largest Medi-Cal plan included penalties totaling \$55 million.

The two departments conducted coordinated investigations into the plan's violations and worked together on the respective department actions. The departments' investigations found several violations by the plan, including L.A. Care's handling of enrollee grievances, the processing of requests for authorization, and inadequate oversight and supervision of its contracted entities regarding timely access.

The DMHC encourages consumers having trouble getting the care they need to file a grievance with their health plan. If the member does not agree with their health plan's response or the plan takes more than 30 days to fix the problem in non-urgent cases, they can file a complaint or apply for an Independent Medical Review with the DMHC Help Center at www.HealthHelp.ca.gov or 1-888-466-2219.

For more information about these actions, please see the [press release](#).

Health Equity & Quality Committee

The DMHC established a Health Equity and Quality Committee to help eliminate health care disparities for Californians in accordance with Assembly Bill (AB) 133 (Committee on Budget, 2021). The Department [announced](#) the Committee membership in February, and the Committee held its first meeting the same month.

The Committee will make recommendations for standard health equity and quality measures, including annual benchmark standards for health plans to assess equity and quality in health care delivery. Following the recommendations and after the DMHC adopts standard health equity and quality measures, health plans will be required to annually report equity and quality data and information to the Department. Starting in 2025, the DMHC will publish a Health Equity and Quality Compliance Report on the data and information reported by health plans.

The Committee members and additional information about meetings can be found on the [Health Equity and Quality Committee page](#) of the DMHC's website. All meetings are open to the public.

DMHC COVID-19 Actions

The DMHC is taking action to protect consumers' health care rights and ensure a stable health care delivery system during the COVID-19 state of emergency.



The banner features a blue background with white and orange text. On the left, it says "Let's Get to ImmUnity!". To the right, it says "Protect yourself, family, friends & your community. Get Vaccinated & Boosted!". On the far right is a shield icon with a heart and a hand. At the bottom, a dark blue bar contains the text "Need help with your Health Plan? Call 1-888-466-2219 or visit us at HealthHelp.ca.gov".

The DMHC's [COVID-19 resource web page](#) includes more information about the Department's actions, including the following consumer fact sheets on coverage options, testing and vaccines.



[Coverage Options Fact Sheet
\(English, Spanish\)](#)



[Consumer Fact Sheet
on COVID-19 Testing](#)



[COVID-19 Vaccine
Fact Sheet](#)

State Resources and Information on COVID-19

Departments throughout the state are working to respond to COVID-19 and ensure Californians have the resources they need to stay safe and healthy. As the pandemic evolves, we understand information can change quickly. It is important that you are getting the most up-to-date information from reliable sources. You can find additional state resources below to stay informed on the latest information and guidance regarding COVID-19.

- [COVID19.ca.gov](https://www.california.gov/covid19)
- [CDPH COVID-19 Updates](#)
- [DHCS COVID-19 Response](#)

Regulation Update

Transfer of Enrollees Pursuant to a Public Health Order

In early 2021, the Office of Administrative Law (OAL) approved an emergency regulation to ensure the appropriate transfer of patients between health care facilities to address the surge of COVID-19 cases. Under this regulation, for patient transfers due to a covered public health order, the health plan cannot require prior authorization or otherwise delay or prevent the transfer; the plan must cover the medically necessary costs of moving the enrollee between the facilities; the plan must reimburse the facilities and other requirements, as specified; and enrollee costs must be limited to in-network costs. The DMHC completed the process to make this regulation permanent, which was approved by the OAL and became permanent on January 26, 2022.

Timely Access to Non-Emergency Health Care Services

The purpose of this regulation is to clarify and make specific the standardized methodology for how health plans report timely access to care requirements and annual network requirements to the DMHC. This regulation will help the DMHC ensure health plans are meeting timely access to care requirements and allow for meaningful comparisons of timely access to care information across health plans. The regulation was submitted to the OAL on June 12, 2020, the first comment period closed on July 27, 2020, the second comment period closed on January 21, 2021, and the third comment period closed on May 3, 2021. The regulation package was approved by the OAL on January 12, 2022 and became effective on April 1, 2022.

Summary of Dental Benefits and Coverage Disclosure Matrix

The purpose of this regulation is to implement requirements for a uniform benefits and coverage disclosure matrix that must be used by health care service plans that issue, sell, renew, or offer a contract that covers dental services in California. This regulation will help ensure that consumers may more easily compare a summary of dental benefits offered by various health care service plans. The DMHC has initiated the permanent rulemaking process, and the Department is currently in a third comment period for the formal adoption of the regulation that will end on June 10, 2022.

Health Plan Financial Reporting Requirements

The purpose of this regulation is to update, clarify, and simplify existing regulations for health plan reporting of financial stability. The first comment period for this regulation closed on February 7, 2022. The second comment period began on March 4, 2022 and ended on March 21, 2022. The regulation was submitted to OAL for final review on April 6, 2022, and was approved on May 18, 2022. The regulation will become effective on July 1, 2022.

DMHC Help Center

The DMHC Help Center educates consumers about their health care rights, resolves consumer complaints, helps consumers navigate and understand their coverage and ensures access to appropriate health care services.

The first step is to file a grievance with your health plan if you are experiencing an issue with your health plan or having difficulty accessing care. Contact the DMHC Help Center for assistance if you are not satisfied with your health plan's resolution of the grievance or have been in the grievance process for 30 days for non-urgent issues. If you have an urgent health issue, please contact the DMHC Help Center immediately. The DMHC Help Center can be reached at 1-888-466-2219 or www.HealthHelp.ca.gov.

If a health plan denies, changes or delays a request for medical services, denies payment for emergency treatment or refuses to cover experimental or investigational treatment, a health plan enrollee can apply for an Independent Medical Review (IMR) through the DMHC Help Center. Independent doctors will review the case, and the health plan must follow the IMR determination. Approximately 68% of consumers who file an IMR with the DMHC receive their requested service or treatment from their health plan. For more information, please visit www.HealthHelp.ca.gov.

DMHC Career Opportunities

The DMHC is always seeking smart, talented and enthusiastic people to join our team. More information about careers with the DMHC is located on the [CalCareers website](#).

DMHC Web Banners

The DMHC created the following web banners to help raise consumer awareness of the DMHC Help Center.

If your organization is interested in hosting the DMHC web banners on your website, please visit the DMHC [website](#) or email stakeholder@dmhc.ca.gov. The web banners are also available in additional languages, including Spanish.



Assistance is Fast, Free & Confidential

Approximately **68%** of consumer appeals (IMRs) resulted in the consumer receiving the requested service or treatment from their health plan

Call: 1-888-466-2219 | Visit: HealthHelp.ca.gov

The DMHC Protects the Health Care Rights of More Than **27.7 Million Californians**

[Learn More](#)

1-888-466-2219

HAVE A PROBLEM WITH YOUR HEALTH PLAN? CONTACT THE DMHC

HealthHelp.ca.gov



[Twitter](#)



[Facebook](#)



[YouTube](#)



[LinkedIn](#)



[Website](#)

About DMHC:

The DMHC protects the health care rights of more than 27.7 million Californians and ensures a stable health care delivery system. The Department has helped 2.5 million Californians resolve health plan problems through the Help Center. Information and assistance is available at www.HealthHelp.ca.gov or by calling 1-888-466-2219.