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HR-26 Department of Managed Health Care. (2015-2016)

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CALIFORNIA LEGISLATURE— 2015–2016 REGULAR SESSION

HOUSE RESOLUTION

NO. 26

Introduced by Assembly Member Low

June 24, 2015

Relative to the Department of Managed Health Care.

LEGISLATIVE COUNSEL'S DIGEST

HR 26, as introduced, Low. Department of Managed Health Care.

Fiscal Committee: no

WHEREAS, The Department of Managed Health Care was created by Assembly Bill 78 (Chapter 525 of the Statutes of 1999), and began operations on January 1, 2000; and

WHEREAS, 2015 marks the 15th anniversary of the creation of the Department of Managed Health Care, which was created to protect the rights of health care service plan enrollees, to educate consumers about their rights and responsibilities, to ensure the financial stability of the managed health care system, and to assist Californians in navigating the changing health care landscape; and

WHEREAS, With currently over 27 million enrollees in plans under the department's jurisdiction, the Department of Managed Health Care is the only state-level department in the United States focused on regulating health maintenance organizations; and

WHEREAS, The Department of Managed Health Care enforces California's landmark Knox-Keene Health Care Service Plan Act of 1975 (the Knox-Keene Act); and

WHEREAS, The strong patient protections contained in the Knox-Keene Act and enforced by the Department of Managed Health Care include the following:

(a) Patients have the right to treatment or services that are medically necessary, and to receive an independent medical review by the Department of Managed Health Care if a treatment or service is denied by a health care service plan.

(b) Patients have the right to receive communications related to services in their primary languages.

(c) Patients have the right to timely access to care, which includes limits on how long a patient must wait to get a health care appointment.

(d) Patients have the right to request continuity of care, for both medicines and doctors.

(e) Patients have the right to an expeditious process to obtain exceptions from step therapy, and to continued access to their prescribed medications when changing plans.

(f) Patients have the right to know why their plan denies a service or treatment.

(g) Patients have the right to view a health plan's drug formulary before signing up for the plan.

(h) Patients have the right to receive treatment for certain mental health conditions.

(i) A health plan must respond within 30 days when a patient files a complaint.

(j) Patients have the right to receive hospice care at the end of life; and

WHEREAS, The Department of Managed Health Care operates and maintains the DMHC Help Center, where patients get assistance with obtaining services from their health plan; now, therefore, be it

Resolved by the Assembly of the State of California, That the Assembly commends the Department of Managed Health Care for 15 years of operation on behalf of California's patients; and be it further

Resolved, that the Assembly encourages all Californians to learn about their legal right to timely access to high quality health care; and be it further

Resolved, That the Chief Clerk of the Assembly transmit copies of this resolution to the author for appropriate distribution.