

**YOUR RIGHTS  
UNDER MEDI-CAL MANAGED  
CARE**

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If you still do not agree with this decision, you can:

- Ask for an “**Independent Medical Review**” (**IMR**) and an outside reviewer that is not related to the health plan will review your case
- Ask for a “**State Hearing**” and a judge will review your case

**You can ask for both an IMR and State Hearing at the same time.** You can also ask for one before the other to see if it will resolve your problem first. For example, if you ask for an IMR first, but do not agree with the decision, you can still ask for a State Hearing later. However, if you ask for a State Hearing first, but the hearing has already taken place, you cannot ask for an IMR. In this case, the State Hearing has the final say.

You will not have to pay for an IMR or State Hearing.

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**INDEPENDENT MEDICAL REVIEW (IMR)**

If you want an IMR, you must ask for one within **180 days** from the date of this “Notice of Appeal Resolution” letter. The paragraph below will provide you with information on how to request an IMR. Note that the term “grievance” is talking about both “complaints” and “appeals.”

The California Department of Managed Health Care is responsible for regulating health care service plans. If you have a grievance against your health plan, you should first telephone your health plan at **1-888-703-6999 / TTY: 1-877-855-8039** and use your health plan’s grievance process before contacting the Department. Utilizing this grievance procedure does not prohibit any potential legal rights or remedies that may be available to you. If you need help with a grievance involving an emergency, a grievance that has not been satisfactorily resolved by your health plan, or a grievance that has remained unresolved for more than 30 days, you may call the Department for assistance. You may also be eligible for an Independent Medical Review (IMR). If you are eligible for IMR, the IMR process will provide an impartial review of medical decisions made by a health plan related to the medical necessity of a proposed service or treatment, coverage decisions for treatments that are experimental or investigational in nature and payment disputes for emergency or urgent medical services. The Department also has a toll-free telephone number (**1-888-466-2219**) and a TDD line (**1-877-688-9891**) for the hearing and speech impaired. The Department’s Internet Website ([www.dmhc.ca.gov](http://www.dmhc.ca.gov)) has complaint forms, IMR application forms, and instructions online.

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For Knox-Keene Plans (NAR)

## **STATE HEARING**

If you want a State Hearing, you must ask for one **no later than 120 days** from the date of this “Notice of Appeal Resolution” letter. **But, if you are currently getting treatment and you want to continue getting treatment, you must ask for a State Hearing within 10 days** from the date this letter was postmarked or delivered to you, OR before the date your dental plan says services will stop. You must say that you want to keep getting treatment when you ask for the State Hearing.

You can ask for a State Hearing by phone or in writing:

- **By phone:** Call **1-800-952-5253**. This number can be very busy. You may get a message to call back later. If you cannot speak or hear well, please call **TTY/TDD 1-800-952-8349**.
- **In writing:** Fill out a State Hearing form or send a letter to:

**California Department of Social  
Services State Hearings Division  
P.O. Box 944243, Mail Station 9-17-37  
Sacramento, CA 94244-2430**

A State Hearing form is included with this letter. Be sure to include your name, address, telephone number, Social Security Number, and the reason you want a State Hearing. If someone is helping you ask for a State Hearing, add their name, address, and telephone number to the form or letter. If you need an interpreter, tell us what language you speak. You will not have to pay for an interpreter. We will get you one.

After you ask for a State Hearing, it could take up to 90 days to decide your case and send you an answer. If you are in pain or think waiting that long will hurt your health or dental function, you might be able to get an answer within 3 working days. Ask your dentist or dental plan to write a letter for you. The letter must explain in detail how waiting for up to 90 days for your case to be decided will seriously harm your health or dental function. Then, make sure you ask for an **“expedited hearing”** and provide the letter with your request for a hearing.

You may speak at the State Hearing yourself. You may have a relative, friend, advocate, dentist, doctor, or attorney speak for you. If you want another person to speak for you, then you must tell the State Hearing office that the person is allowed to speak for you on your behalf. This person is called an “authorized representative.”

## **LEGAL HELP**

You may be able to get free legal help. Call the Health Consumer Alliance at 1-888-804-3536/TTY: 877-735-2929. You may also call the local Legal Aid Society in your county at 1-800-399-4529.