



How Consumers Can Address Quality of Care Concerns

Are you dissatisfied with the care you received from a health plan?

■ Step 1: File a complaint with your health plan:

- ☐ Call Member Services to file a complaint, also called a grievance

TIP: The number is on your membership ID card.

■ Step 2: File a complaint with your health plan's regulator if your health plan denied or delayed access to services, you were charged more than you think you should have been charged, or you have a problem with your plan's customer service:

TIP: You can find out which agenc(ies) regulates your health plan by contacting your health plan's Member Services or by looking at the end of your plan grievance decision.

■ Regulators:

- ☐ Contact the **Department of Managed Health Care's (DMHC) Help Center** at 1-888-466-2219. You can file a complaint by mail, fax or online [here](#).
 - **What plans does DMHC regulate?** Most Medi-Cal managed care plans, most Covered California plans, all HMOs, and some PPO and EPO products, as well as dental and vision plans. Click [here](#) for a list of plans that DMHC covers.

TIP: You must file a complaint within six months after your health plan sends you a written decision about your issue.

- ☐ Contact the **CA Department of Insurance (CDI)** at 1-800-927-4357 (HELP)

- **What plans does CDI regulate?** Most PPOs and EPOs but not HMOs, some PPOs, self-insured plans, and Medicare and Medi-Cal plans.

- ☐ Contact the **U.S. Department of Labor (DOL), Employee Benefits Security Administration** at 1-866-444-3272.

- **What plans does the DOL regulate?** It covers self-insured health plans—plans where a (large) employer, instead of the insurance company, keeps a fund to pay out insurance claims.

TIP: How do I know if I have a self-insured plan? Ask your employer's employee benefits administrator or human resources department.

- ☐ To **file a complaint** about a self-insured plan, go to the DOL Employee Benefits Security Administration website, click [here](#) and follow the instructions

If you have a Covered California plan, you also have the right to:

■ Step 1: File a complaint or appeal with **Covered California** at 1-800-300-1506

- ☐ You can submit a complaint over the phone, by fax, by email or online. The form can be found [here](#).

■ Step 2: Contact the **Covered California Ombuds Office** by submitting a Contact Form. If your issue is not resolved, or not resolved in a timely manner, through the complaint or appeals process:

- You can submit the Contact Form online [here](#).

For free and confidential legal assistance, contact the **Health Consumer Center** at **1-888-804-3536**. Visit www.healthconsumer.org for more information.

If you have a Medicare plan:

■ File a complaint or request a quality of care review with **Medicare's Quality Improvement Organizations (QIO) Program**

- Go to <https://qioprogram.org/locate-your-bfcc-qio>. Select "California" → Livanta, LLC: 1-877-588-1123

TIP: Contact your local State Health Insurance Assistance Programs (SHIPs) for local, personalized counseling and assistance to people with Medicare and their families.

Are you unhappy with the care you received from a provider?

■ File a complaint with the **Medical Board of California's Central Complaint Unit** at 1-800-633-2322

File a complaint against a physician, surgeon, midwife or research psychoanalyst for substandard care, prescription problems, sexual misconduct, and unprofessional conduct, among other concerns (Not billing disputes)

■ File a complaint with the **Dental Board of California** or dentalboardcomplaints@dca.ca.gov at 916-263-2300 if your provider is a dentist.

■ File a complaint with the **CA Board of Registered Nursing** at 916-574-7693 or submit a complaint [here](#) if your provider is a nurse

Have you received poor treatment at a health care facility, or have you been discriminated against by a provider or staff at a health care facility?

■ **Step 1:**

- Communicate with the staff at the facility and file a grievance with the health care facility or hospital
- File a complaint with the **CA Department of Public Health's Center for Health Care Quality (CHCQ)** at [CalHealthFind](https://calhealthfind.org)

TIP: You can also file a complaint by calling or writing the Licensing and District Office nearest you. The list of District Offices is [here](#).

TIP: If you experience disability access issues, contact CalHealthFind@cdph.ca.gov.

■ **Step 2:**

File a complaint with the **U.S. Department of Health and Human Services, Office for Civil**

Rights at 1-800-368-1019 if you have been discriminated against based on your race, color, national origin, disability, age, sex or religion

TIP: You can file a complaint electronically via the complaint portal [here](#).

- File a complaint with the **CA Department of Fair Employment and Housing** at 1-800-884-1684 or contact.center@calcivil-rights.ca.gov if you are denied care or restricted access to a hospital that receives state funding or state financial assistance
- You are protected if you are discriminated based on sex, gender, race, color, gender identity, gender expression, religion, creed, ancestry, national origin, ethnic group, age, disability, medical condition, genetic information, marital status, or sexual orientation

TIP: You can also reach out to the [Contact Center](#) if you need translation assistance.

■ **Step 3:** If you are in a long-term care facility (nursing home, residential care facility or residential care facility):

- Contact the **Long Term Care Ombudsman** in your county. The complete list is [here](#).

TIP: The State **CRISIS** line is available to take calls 24/7 at 1-800-231-4024.

Are you unable to obtain your medical records or have your health information privacy rights been violated?

- File a complaint with the **Medical Board of California** at 1-800-633-2322 or 916-263-2382
 - o Click [here](#) for instructions on how to file a complaint online or by mail.

TIP: Your physician has 15 days to provide you copies of your medical records after you have requested them. If you are requesting records for an appeal regarding eligibility for public benefits (including Medi-Cal, CalFresh, IHSS, SSI, and disability), you may be entitled to the records at no cost.

- File a complaint with the **U.S. Department of Health & Human Services, Office for Civil Rights** at 1-800-368-1019 if your privacy rights have been violated by your health plan, a health care provider, clinic or their affiliates.

TIP: You can file a complaint electronically via the complaint portal [here](#).