



**Continuity of Care - Frequently Asked Questions come from the Department of Health Care Services.



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Continuity of Care for Members in Transitioning Counties

Medi-Cal Managed Care Plan Transition

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What is Continuity of Care?

"Continuity of Care" means that you may be able to keep your Medi-Cal provider for up to 12 months after you enroll in your new Medi-Cal health plan. You will continue receiving your Medi-Cal covered service.

Does this apply to me?

Continuity of Care applies to you if:

- Your Medi-Cal health plan is no longer available in your county as of January 1, 2024, **or**
- Your Medi-Cal health plan in 2023 is Health Net in Los Angeles County and Health Net informs you in mid-November 2023 that you will be re-assigned automatically to their partner Molina Healthcare on January 1, 2024, **or**

- You are receiving Medi-Cal services from Kaiser Permanente providers and Kaiser informs you that you will be [automatically enrolled](#) into Kaiser Permanente Medi-Cal Plan, starting January 1, 2024, **or**
- You are 25 years old or younger, and are receiving foster care services or used to receive foster care services, and are enrolling in Medi-Cal managed care from regular (fee-for-service) Medi-Cal.

Can I keep my providers in my new Medi-Cal health plan?

You will get most of your needed health care services through your new Medi-Cal health plan's provider network (group). It has doctors, therapists, imaging centers, transportation, etc.

Not all providers are in all networks. The providers you are used to seeing may not be in your new Medi-Cal health plan's network. If your existing provider is not in your Medi-Cal managed care plan's network, you may be able to keep a Medi-Cal provider for up to 12 months under "Continuity of Care."

Medi-Cal providers you may request to keep seeing include:

- your primary care doctor
- specialists
- most therapists
- and other providers

Therapists you may be able to keep include:

- physical
- occupational
- respiratory
- speech
- mental health
- behavioral health treatment providers

Other providers include:

- Enhanced Care Management providers
- Community Support providers
- Skilled Nursing Facilities
- Intermediate Care Facilities for individuals with Developmental Disabilities
- Community-Based Adult Services
- dialysis centers
- doulas
- community health workers

You may be able to get Continuity of Care protections to keep a Medi-Cal provider for up to 12 months if **all** of these apply to you:

- You went to that provider at least once in the last 12 months,
- Your provider is willing to work with your new health plan by making an agreement with your new plan to get paid, and
- Your Medi-Cal managed care plan does not have any quality of care concerns with your provider.

How do I get Continuity of Care?

There are three ways to get Continuity of Care:

1. **Call your new plan.**

Your new health plan's phone number is in your enrollment packet and on your new health plan card that you will receive in early January 2024. Ask your new health plan if they already work with your doctors, therapists, and other providers.

- If they do, you can keep your doctors, therapists, and other providers.
- If they don't, you can ask if you can keep your doctors, therapists, and other providers. You can only keep them for up to 12 months.

2. **Ask your doctor, therapist, or provider to call your new health plan.**

A provider can call the plan and ask to keep you as their patient.

3. **Ask a family member or person representing you to call your new health plan.**

Others can call your new health plan for you. They can make a request on your behalf as your authorized representative. Your new health plan may ask you directly if you are okay with someone asking on your behalf.

What if my provider doesn't want to work with my new health plan?

If your previous Medi-Cal provider does not want to work with your new health plan, your Medi-Cal managed care plan will find you another provider to provide you with the services you need. You will need to choose a new provider in your new plan's network.

What if I'm in the hospital?

You are still eligible to receive Continuity of Care while in the hospital. Your new Medi-Cal health plan will work with your old health plan and your hospital so you can continue to get the services you need. You will not be billed for covered Medi-Cal services.

Can I still get all my medicines?

Yes, you can usually get the same medicines even if your previous Medi-Cal provider does not work with your new plan.

Medi-Cal Rx covers most of your prescription drugs. Your new provider can prescribe them for you to get from your pharmacy.

Your Medi-Cal health plan covers the drugs your provider gives you in person, such as at the doctor's office or clinic.

Learn more about Medi-Cal Rx prescription drug coverage and pharmacies that take Medi-Cal:

- **Website:** www.medi-calrx.dhcs.ca.gov
- **Medi-Cal Rx Customer Service Center**
 - **Phone:** (800) 977-2273 (Call is free)
 - **TTY:** State Relay at 711

Talk to your new doctor about the medicines you are taking.

Can I continue my treatment or service?

If you were seeing a Medi-Cal doctor prior to January 1, 2024, and following their ordered treatment, you will be able to continue your treatment or service until July 1, 2024. You may need to see your doctor to complete a new treatment plan to continue getting the treatment beyond July 1, 2024.

You may need to switch doctors to continue your treatment if your doctor does not agree to work with your new Medi-Cal health plan. Call your new health plan to ask if you can continue your treatment with your provider.

What if I have an authorization for a service but haven't received the service yet?

If you have an authorization for a service from your previous Medi-Cal health plan before January 1, 2024, then you can get that service without a new authorization after January 1, 2024. You may need to see your doctor to get a new authorization to continue getting the service beyond July 1, 2024.

What if I have a scheduled surgery or an appointment with a specialist or doctor I haven't been to before?

If you want to keep a scheduled surgery or appointment with a specialist, you have not gone to before, call your new health plan to ask if you can keep the surgery or appointment. Your new health plan will either let you keep it or help you schedule it with a provider in your new health plan's network.

What if I have Medi-Cal and Medicare?

This information applies only to your Medi-Cal providers. Your new Medi-Cal health plan does not limit Medicare providers. Medicare providers do not have to be in your Medi-Cal plan's provider network. Your Medicare coverage will not change.

What if I have more questions?

Here are three places to get help:

Office of the Ombudsman

- **Phone:** (888) 452-8609 (Call is free.)
- **TTY:** 711 for California State Relay
- **Hours:** Monday – Friday (excluding holidays), from 8 a.m. to 5 p.m.
- **Email:** MMCDOmbudsmanOffice@dhcs.ca.gov
- **Website:** www.dhcs.ca.gov/ombudsman

Contact the Office of the Ombudsman for any of these reasons:

- To ask to keep your provider for up to 12 months after you join a new managed care plan.
- If you contacted your plan or provider but still need help with your Continuity of Care request.
- To get advice if you do not agree with your treatment or services.
- To ask other questions about your plan, provider, or Medi-Cal.

Medi-Cal Health Care Options

Learn more about your Medi-Cal health plan choices and doctors who work with Medi-Cal health plans:

- **Phone:** 1-800-430-4263 (Call is free.)
- **TTY:** 1-800-430-7077
- **Hours:** Monday – Friday, 8 a.m. to 6 p.m.
- **Website:** www.healthcareoptions.dhcs.ca.gov

Department of Managed Health Care (DMHC) Help Center

Help to find health coverage or help if you have a health plan complaint.

- **Phone:** (888) 466-2219 (Call is free.)
- **Hours:** 24 hours a day, 7 days a week
- **Website:** dmhc.ca.gov

Can I get this information in an alternative format?

Please email MCQMD@dhcs.ca.gov