```
California Code Of Regulations
|->
Title 22@ Social Security
|->
Division 3@ Health Care Services
|->
Subdivision 1@ California Medical Assistance Program
|->
Chapter 2@ Determination of Medi-Cal Eligibility and Share of Cost
|->
Article 4@ Beneficiary Application Process
|->
Section 50151@ Date of the Application
```

## 50151 Date of the Application

## (a)

The date of application for a person or family applying for Medi-Cal shall be the date the completed application form is received by the county department.

## (b)

The date of application for a person or family applying for Medi-Cal in a county other than the county of responsibility shall be the date the completed application form is received by the county department in which the application is being made.

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