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California Code Of Regulations
|->
Title 22@ Social Security
|->
Division 3@ Health Care Services
|->
Subdivision 1@ California Medical Assistance Program
|->
Chapter 4.1@ Two-Plan Model Managed Care Program
|->
Article 7@ MARKETING, ENROLLMENT, ASSIGNMENT, AND DISENROLLMENT
|->
Section 53888@ Enrollment/Disenrollment Form
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53888 Enrollment/Disenrollment Form

(a)

The Health Care Options Program shall make the enrollment/disenrollment form available in the Health Care Options information packets mailed to mandatory eligible beneficiaries, at the Health Care Options presentations, and at department-approved Health Care Options Program sites. The Health Care Options Program shall mail the enrollment/disenrollment form to a beneficiary within three working days of receiving a telephone or written request for a form.

(b)

Plans shall make the enrollment/disenrollment form available at the member services departments and shall mail the form to a beneficiary within three working days of receiving a telephone or written request for a form.