

TITLE 50: INSURANCE
PART 5420 MANAGED CARE REFORM & PATIENT RIGHTS
CHAPTER I: DEPARTMENT OF INSURANCE

Section 5420.60 Transition of Services

- a) Health care plans shall notify new enrollees and current enrollees of the availability of transitional services for conditions that require ongoing course of treatment.
- b) New enrollees must request the option of transitional services in writing, within 15 days after receiving notification of the availability of transitional services, through a mechanism established by the health care plan.
- c) Enrollees whose physician leaves the health care plan's network of health care providers shall request the option of transitional services in writing within 30 days after receipt of notification of termination of the physician.
- d) Within 15 days after receiving such notification from the enrollee, the health care plan shall notify the enrollee if a denial is issued for the enrollee's request of transitional services based on the enrollee's physician refusing to agree to accept the health care plan's reimbursement rates, adhere to the health care plan's quality assurance requirements, provide the health care plan with necessary medical information related to the enrollee's care, or otherwise adhere to the health care plan's policies and procedures. The notification shall be in writing and include the specific reason for such denial.