

Platinum 90 HMO



Individual & Family Plan  
個人/家庭計劃

## Combined Evidence of Coverage and Disclosure Form 保障說明書

DMHC Approval Date – 08/13/2020

**Balance**  
by CCHP



**COVERED  
CALIFORNIA**



Combined  
Evidence of Coverage and  
Disclosure Form  
**CCHP Platinum 90 HMO**



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