

§ 1367.46. Coverage for HIV testing required

Every individual or group health care service plan contract that is issued, amended, or renewed on or after January 1, 2009, that covers hospital, medical, or surgery expenses shall provide coverage for human immunodeficiency virus (HIV) testing, regardless of whether the testing is related to a primary diagnosis.

HISTORY:

Added Stats 2008 ch 631 § 1 (AB 1894), effective January 1, 2009.