

§ 1367.34. Coverage for home test kits by health care service plans

(a)(1) Every health care service plan contract issued, amended, renewed, or delivered on or after January 1, 2022, shall provide coverage for home test kits for sexually transmitted diseases (STD), including any laboratory costs of processing the kit, that are deemed medically necessary or appropriate and ordered directly by a clinician or furnished through a standing order for patient use based on clinical guidelines and individual patient health needs.

(2) A commercial health care plan is required to cover the services outlined in paragraph (1) when ordered for an enrollee by an in-network provider.

(b) For purposes of this section, “home test kit” means a product used for a test recommended by the federal Centers for Disease Control and Prevention guidelines or the United States Preventive Services Task Force that has been CLIA-waived, FDA-cleared or -approved, or developed by a laboratory in accordance with established regulations and quality standards, to allow individuals to self-collect specimens for STDs, including HIV, remotely at a location outside of a clinical setting.

(c) This section shall not apply to health care service plans contracting with the State Department of Health Care Services pursuant to Chapter 7 (commencing with Section 14000) or Chapter 8 (commencing with Section 14200) of Part 3 of Division 9 of the Welfare and Institutions Code. For those health care service plans, the Medi-Cal requirements contained in subdivision (af) of Section 14132 of the Welfare and Institutions Code shall apply.

HISTORY:

Added Stats 2021 ch 486 § 3 (SB 306), effective January 1, 2022.