New law prohibits a health coverage plan delivered or issued for delivery in this state from denying coverage for COVID-19 diagnostic and antibody testing and antiviral drugs when ordered by a physician for the purpose of making clinical decisions or treating a patient suspected of having COVID-19.

Requires any health coverage plan delivered or issued for delivery in this state to include coverage for COVID-19 diagnostic and antibody testing and antiviral drugs.

Prohibits the application of annual deductibles, coinsurance, copayment, or any other out-of-pocket or cost-sharing expense provisions until December 31, 2021. After December 31, 2021, these services may be subject to these cost-sharing requirements.


New law is not applicable to a plan providing coverage for excepted benefits, limited benefit health insurance plans, high deductible health plans authorized under federal law, and short-term policies that have a term of less than 12 months.

Effective upon signature of the governor (June 11, 2020).

(Adds R.S. 22:1057)