## ENGROSSED SUBSTITUTE HOUSE BILL 1971

## State of Washington 69th Legislature 2025 Regular Session

By House Health Care & Wellness (originally sponsored by Representatives Macri, Doglio, Parshley, Berry, Ramel, Ormsby, Pollet, Scott, and Hill)

READ FIRST TIME 02/21/25.

- AN ACT Relating to increasing access to prescription hormone therapy to patients of all ages by requiring health plans to provide reimbursement for a 12-month refill of prescription hormone therapy obtained at one time by an enrollee; reenacting and amending RCW 41.05.017; and adding a new section to chapter 48.43 RCW.
- 6 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:
- NEW SECTION. **Sec. 1.** A new section is added to chapter 48.43 RCW to read as follows:
- (1) A health plan issued or renewed on or after January 1, 2026, 9 10 that includes coverage for prescription hormone therapy must provide reimbursement for a 12-month refill of covered prescription hormone 11 12 therapy obtained at one time by the enrollee, unless the enrollee 13 requests a smaller supply, the prescribing provider instructs that 14 the enrollee must receive a smaller supply, or the prescription 15 hormone therapy is a controlled substance. The 12-month refill 16 requirement only applies to prescription hormone therapy that is able 17 to be safely stored at room temperature without refrigeration. If the 18 prescription hormone therapy is a controlled substance, the health 19 plan must provide reimbursement for the maximum refill allowed under 20 state and federal law to be obtained at one time by the enrollee. Any 21 dispensing practices required by the health plan must follow clinical

p. 1 ESHB 1971

guidelines for appropriate prescribing and dispensing to ensure the health of the patient while maximizing access to effective prescription hormone therapy.

- (2) Nothing in this section prohibits a health plan from limiting refills that may be obtained in the last quarter of the plan year if a 12-month supply of the prescription hormone therapy has already been dispensed during the plan year.
- (3) Nothing in this section prohibits a prescribing provider from temporarily limiting refills that may be obtained to a 90-day supply at one time if the prescription hormone therapy is experiencing an acute dispensing shortage during the plan year provided limits must be rescinded at first opportunity of a regularly reinstated, sustainable supply.
- (4) To the extent not otherwise prohibited under this section or state or federal law, health plans may apply drug utilization management strategies to prescription drugs covered under subsection (1) of this section.
- (5) For purposes of this section, "prescription hormone therapy" means all drugs approved by the United States food and drug administration that are used to medically suppress, increase, or replace hormones that the body is not producing at intended levels. Prescription hormone therapy does not include glucagon-like peptide-1 and glucagon-like peptide-1 receptor agonists.
- Sec. 2. RCW 41.05.017 and 2024 c 251 s 5 and 2024 c 242 s 10 are each reenacted and amended to read as follows:

Each health plan that provides medical insurance offered under this chapter, including plans created by insuring entities, plans not subject to the provisions of Title 48 RCW, and plans created under RCW 41.05.140, are subject to the provisions of RCW 48.43.500, 70.02.045, 48.43.505 through 48.43.535, 48.43.537, 48.43.545, 48.43.550, 70.02.110, 70.02.900, 48.43.190, 48.43.083, 48.43.0128, 48.43.780, 48.43.435, 48.43.815, 48.200.020 through 48.200.280, 48.200.300 through 48.200.320, 48.43.440, section 1 of this act, and chapter 48.49 RCW.

--- END ---

p. 2 ESHB 1971