
Health Care & Wellness Committee

HB 1971

Brief Description: Increasing access to prescription hormone therapy.

Sponsors: Representatives Macri, Doglio, Parshley, Berry, Ramel, Ormsby, Pollet, Scott and Hill.

<p>Brief Summary of Bill</p> <ul style="list-style-type: none">• Requires health plans that cover prescription hormone therapy to reimburse a 12-month refill of prescription hormone therapy at one time.

Hearing Date: 2/18/25

Staff: Chris Blake (786-7392).

Background:

Hormones are chemicals produced by endocrine glands in the body. They create chemicals that coordinate different functions in the body by sending specific signals to particular organs. They control numerous bodily processes such as metabolism, regulating blood pressure and blood sugar, growth and development, sexual function, reproduction, the sleep-wake cycle, and mood.

Hormone therapy uses medications to control the levels or effects of hormones in the body for different medical purposes. Hormone therapy can be used for symptoms of menopause, gender affirming treatment, low testosterone in men, infertility, treatments for different types of cancer, growth hormones for children, puberty blockers for early puberty, thyroid disorders, and other conditions.

Summary of Bill:

This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not part of the legislation nor does it constitute a statement of legislative intent.

Health plans issued or renewed on or after January 1, 2026, including health plans issued to public and school employees, that include coverage for prescription hormone therapy must provide reimbursement for a 12-month refill of covered hormone therapy obtained at one time by the enrollee.

There are exceptions to the 12-month refill requirement for prescription hormone therapy if:

- the enrollee requests a smaller supply;
- the prescribing provider instructs that the enrollee must have a smaller supply;
- the prescription hormone therapy is a controlled substance;
- the health plan limits refills that may be obtained in the last quarter of a plan year when a 12-month supply has already been dispensed during the plan year; and
- a prescribing provider temporarily limits refills to a 90-day supply due to an acute dispensing shortage during the plan year.

If the prescription drug is a controlled substance, then the health plan must provide reimbursement for the maximum refill allowed by state and federal law.

The health plan's dispensing practices must follow clinical guidelines for appropriate prescribing and dispensing to ensure the health of the patient while maximizing access to effective prescription hormone therapy.

The term "prescription hormone therapy" is defined as 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. The term does not include glucagon-like peptide-1 and glucagon-like peptide-1 receptor agonists.

Appropriation: None.

Fiscal Note: Requested on February 13, 2025.

Effective Date: The bill takes effect 90 days after adjournment of the session in which the bill is passed.