

HOUSE BILL REPORT

HB 2242

As Reported by House Committee On:
Health Care & Wellness

Title: An act relating to preserving access to preventive services by clarifying state authority and definitions.

Brief Description: Preserving access to preventive services by clarifying state authority and definitions.

Sponsors: Representatives Bronoske, Doglio, Parshley, Simmons, Berry, Ramel, Thomas, Ormsby, Thai, Macri, Fosse, Hill, Pollet, Obras, Wylie and Zahn; by request of Governor Ferguson, Insurance Commissioner.

Brief History:

Committee Activity:

Health Care & Wellness: 1/16/26, 1/28/26 [DPS].

Brief Summary of Substitute Bill

- Authorizes the Department of Health (Department) to issue immunization recommendations and guidance.
- Replaces the requirement that health plans provide coverage for immunizations recommended by the Advisory Committee on Immunization Practices (ACIP) with a requirement to cover immunizations that have a recommendation from the Department.
- Changes the recommending entity for determining which immunizations must be considered "vaccines" for the purposes of the Washington Vaccine Association from the ACIP to the Department.

HOUSE COMMITTEE ON HEALTH CARE & WELLNESS

Majority Report: The substitute bill be substituted therefor and the substitute bill do pass.

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.

Signed by 11 members: Representatives Bronoske, Chair; Lekanoff, Vice Chair; Rule, Vice Chair; Davis, Macri, Obras, Parshley, Shavers, Simmons, Stonier and Thai.

Minority Report: Do not pass. Signed by 4 members: Representatives Schmick, Ranking Minority Member; Marshall, Assistant Ranking Minority Member; Valdez, Assistant Ranking Minority Member; Low.

Minority Report: Without recommendation. Signed by 3 members: Representatives Engell, Manjarrez and Stuebe.

Staff: Chris Blake (786-7392).

Background:

Vaccine Recommendations.

The Advisory Committee on Immunization Practices (ACIP) provides recommendations to the Centers for Disease Control and Prevention (CDC) regarding the use of vaccines and other agents for the control of vaccine-preventable diseases in the United States. The recommendations made by the ACIP are reviewed by the CDC and, if adopted, they are published as the CDC's annual immunization schedules of vaccines for children and adolescents, as well as adults. The ACIP recommendations are not requirements for immunizations which are typically the responsibility of the states, such as school immunization requirements.

In addition, the ACIP has statutory responsibilities for certain federal programs. Under the Vaccines for Children Program (VCP), the federal Department of Health and Human Services purchases and delivers pediatric vaccines to each state for administration to eligible children, without charge to the state. The ACIP is responsible for establishing the list of pediatric vaccines to be purchased, delivered, and administered under the VCP. In addition, under the Affordable Care Act, health plans must provide coverage for specified immunizations and preventive services without any cost sharing requirements. The ACIP is responsible for recommending which immunizations must be covered under the provision.

In Washington, the primary role of the state with respect to vaccines relates to recommending immunizations for school attendance. For this purpose, the State Board of Health is responsible for adopting rules to establish the requirements for full immunization for school-age children against vaccine preventable diseases.

Health Plan Coverage for Preventive Services.

In Washington, nongrandfathered health plans issued after June 6, 2024, must provide coverage for several identified preventive services. The services include the following recommendations and guidelines as they existed on January 8, 2024:

- evidence-based items or services that have a rating of A or B in the current recommendations of the United States Preventive Services Task Force (USPSTF);
- immunizations for routine use in children, adolescents, and adults recommended by

- the ACIP;
- evidence-informed preventive care and screenings for infants, children, and adolescents provided for in comprehensive guidelines supported by the United States Health Resources and Services Administration (HRSA); and
 - preventive care and screenings for women provided for in comprehensive guidelines supported by the HRSA.

The health plans must provide coverage for the required preventive services consistent with federal rules and guidance in effect on January 8, 2024. The coverage must be provided without any cost-sharing requirements when provided by an in-network provider or an out-of-network provider, if a health plan does not have an in-network provider who can provide a preventive item or service.

Annually, a health carrier must include in its filings to the Office of the Insurance Commissioner a determination of whether any additional items or services must be covered without cost sharing or whether any items or services are no longer required to be covered.

Washington Vaccine Association.

The Washington Childhood Vaccine Program supplies, at no cost, vaccines to participating health care providers for administration to persons under the age of 19. The program includes all vaccines recommended by the ACIP.

The program is funded by a combination of federal funds available through the VCP, state funds, and assessments on health carriers and third-party administrators. The assessments on health carriers and third-party administrators are collected and remitted to the Department of Health by the Washington Vaccine Association, which is a public-private nonprofit corporation. The assessments are determined by calculating the total estimated cost of purchasing and distributing vaccines at the federal discount rate and subtracting the amount of federal revenue available to the state for the purchase and distribution of vaccines as well as any amounts to serve children enrolled in state-purchased health care programs. The remaining amount is divided among health carriers and third-party administrators according to each one's proportional share.

Summary of Substitute Bill:

Immunization Recommendations.

The Department of Health (Department) is authorized to issue immunization recommendations and guidance. The Department must consider the recommendations of the Advisory Committee on Immunization Practices (ACIP) of the Centers for Disease Control and Prevention (CDC), as well as experts and expert organizations that the Department deems relevant and based on reasonable scientific evidence and judgment. The recommendations or guidance are not subject to rulemaking requirements, however, the Department must post them on its website.

Health Plan Coverage for Preventive Services.

The requirement that nongrandfathered health plans provide coverage for certain identified preventive services applies to those plans issued on or after April 1, 2026, rather than June 6, 2024.

The requirement that the coverage for preventive services applies to recommendations and guidelines as they existed on January 8, 2024, is extended to recommendations and guidelines as they existed on June 30, 2025. The revised date applies to: (1) items or services that have a rating of A or B in the recommendations of the United States Preventive Services Task Force (USPSTF); (2) preventive care and screenings for infants, children, and adolescents provided for in comprehensive guidelines supported by the United States Health Resources and Services Administration (HRSA); and (3) preventive care and screenings for women provided for in comprehensive guidelines supported by HRSA. Health plans must also provide coverage as required by the Insurance Commissioner (Commissioner) in rule for these items, services, care, and screenings. The coverage must be provided consistent with federal rules and guidance in effect on June 30, 2025, and rules adopted by the Commissioner.

The requirement that health plans provide coverage for immunizations for routine use in children, adolescents, and adults recommended by the ACIP is replaced with a requirement to cover immunizations that have a recommendation from the Department. The coverage for immunizations must be consistent with Department guidance.

The authority for health plans to discontinue coverage for preventive items or services that are removed from the applicable recommendations or guidelines is eliminated. The requirement that health carriers annually determine whether additional items or services must be covered without cost-sharing or whether other items are no longer required to be covered is eliminated. Health carriers may apply medical management techniques to the extent that the Department's immunization recommendations and other preventive services recommendations and guidelines in effect June 30, 2025, rather than January 8, 2024, are not specific regarding frequency, method, treatment, or setting.

For health plans that are qualifying health plans for a health savings account, the health carrier may apply cost sharing to preventive services at the minimum level necessary to be able to claim tax-exempt contributions and withdrawals, regardless of the status of federal preventive service requirements.

The Commissioner is authorized to modify coverage requirements for preventive items, services, care, and screenings based on the addition of preventive services or other changes to USPSTF or HRSA recommendations and guidelines. The rules must be as or more favorable to enrollees with respect to coverage of preventive services than the recommendations and guidelines in effect on June 30, 2025. When adopting rules, the Commissioner must consult with the Department and the Health Care Authority and

consider the Department's immunization recommendations and recommendations from the USPSTF, HRSA, and other experts and expert organizations based on reasonable scientific evidence and judgment. References to the Commissioner enforcing preventive services standards consistent with federal law and adopting rules based on future recommendations and guidelines of the USPSTF, ACIP, and HRSA are removed.

Washington Vaccine Association.

The recommending entity for determining which immunizations must be considered "vaccines" for the purposes of the Washington Vaccine Association is changed from the ACIP to the Department. In addition, the immunization must have been approved by the federal Food and Drug Administration as safe and effective in any manner.

When determining the total estimated cost to the state for the purchase and distribution of vaccines, the Department is not limited to considering only those vaccines purchased at the federal discount rate. Instead, the Department must prioritize purchasing vaccines at the federal discount rate or, if not available, at the most cost-effective rate. The requirement that health carrier and third-party administrator assessments be used to purchase state-supplied vaccines from the CDC is no longer limited to only CDC vaccines.

Postenactment Review.

The Joint Legislative Audit and Review Committee (JLARC) must conduct a review of the the act by November 15, 2032, to determine whether it has preserved access to vaccines and preventive services and whether vaccine purchases have been made in a cost-effective manner. The Department of Health and the Office of the Insurance Commissioner must submit available data related to the review to the JLARC by September 30, 2031.

Substitute Bill Compared to Original Bill:

The substitute bill directs the Joint Legislative Audit and Review Committee (JLARC) to conduct a postenactment review of the act by November 15, 2032, to determine whether it has preserved access to vaccines and preventive services and whether vaccine purchases have been made in a cost-effective manner. The Department of Health and the Office of the Insurance Commissioner must submit available data related to the review to the JLARC by September 30, 2031.

Appropriation: None.

Fiscal Note: Available.

Effective Date of Substitute Bill: The bill contains an emergency clause and takes effect immediately.

Staff Summary of Public Testimony:

(In support) Since 2010, Washingtonians have benefited from access to preventative services, such as well child visits, cancer screening, maternal health care, and immunizations and health insurers have been required to cover them with no cost to consumers. This bill will maintain access to these important preventative services for those who choose to use them. Covering preventive services is one of the proven ways the state can reduce more expensive health care a person may need.

The purpose of this bill is to provide more flexibility for the Department of Health to develop recommendations for adult and childhood vaccine schedules that are based on a variety of expert sources and not rely entirely on federal authorities to determine those recommendations. This bill reinforces access to health care that is grounded in science, transparency, and trust and assures that there is a transparent process with clear documentation explaining the basis for the recommendations made by the Department of Health. This bill ensures that Washington continues to rely on science and data-driven guidance that parents, clinicians, and public health officials can trust. Recent actions at the federal level have jeopardized continued access to preventative services. Preserving the financial efficacy and sustainability of the vaccine purchasing program is of utmost importance to health carriers. This bill ensures personal choice and does not mandate any specific therapy or intervention.

(Opposed) None.

Persons Testifying: Representative Dan Bronoske, prime sponsor; Patty Kuderer, Washington State Insurance Commissioner; Dennis Worsham, Washington State Secretary of Health; Caitlin Safford, Washington State Office of the Governor; Michael Van Dyke, WCAAP; Megan Moore, Washington State Public Health Association; Marissa Ingalls, Association of Washington Healthcare Plans; Dr. Helen Chu, UW Medicine; Dr. Sandra Valenciano, Public Health Seattle-King County; Dr. Frank Bell, WA Chapter American Academy of Pediatrics; Dr. Jay Miller, Tacoma-Pierce County Health Department; Roy Simms, Community Health of Central Washington; and Dr. Katina Rue, Washington Academy of Family Physicians.

Persons Signed In To Testify But Not Testifying: None.