

# HOUSE BILL REPORT

## SSB 5917

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**As Passed House:**  
February 28, 2026

**Title:** An act relating to improving access to abortion medications.

**Brief Description:** Improving access to abortion medications.

**Sponsors:** Senate Committee on Human Services (originally sponsored by Senators Bateman, Frame, Alvarado, Cleveland, Conway, Hasegawa, Lias, Nobles, Orwall, Pedersen, Saldaña, Salomon, Stanford, Valdez and Wilson, C.; by request of Women's Commission).

**Brief History:**

**Committee Activity:**

Health Care & Wellness: 2/18/26, 2/20/26 [DP].

**Floor Activity:**

Passed House: 2/28/26, 57-36.

**Brief Summary of Substitute Bill**

- Removes requirements that the Department of Corrections (DOC) sell the abortion medications it possesses at a certain cost and instead allows, but does not require, the DOC to obtain payment for any abortion medications it distributes.
- Modifies the definition of "abortion medications" for these purposes to specifically include misoprostol.

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### HOUSE COMMITTEE ON HEALTH CARE & WELLNESS

**Majority Report:** Do pass. Signed by 10 members: Representatives Bronoske, Chair; Lekanoff, Vice Chair; Rule, Vice Chair; Davis, Macri, Obras, Parshley, Shavers, Stonier and Thai.

**Minority Report:** Do not pass. Signed by 6 members: Representatives Schmick, Ranking

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*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.*

Minority Member; Marshall, Assistant Ranking Minority Member; Valdez, Assistant Ranking Minority Member; Engell, Low and Stuebe.

**Staff:** Kim Weidenaar (786-7120).

**Background:**

Washington State Department of Corrections.

The Department of Corrections (DOC) provides medically necessary health and mental health care to incarcerated individuals at all DOC facilities in the state of Washington. Pharmacy services are provided from a DOC centralized pharmacy located in Centralia and prescription drugs are shipped to state prisons across the state.

The DOC is authorized to acquire, possess, sell, deliver, dispense, and distribute abortion medications. The DOC may exercise this authority for the benefit of any person, regardless of whether the person is in the DOC's custody. In 2023 the DOC purchased 30,000 doses of mifepristone and in January 2025 the DOC purchased 17,600 additional doses of mifepristone and 155,000 doses of misoprostol. In circumstances where the DOC is selling, delivering, or distributing abortion medications to a health care provider or entity, the DOC may only sell the abortion medications to health care providers or entities that will only use the medications for providing abortion care or medical management of early pregnancy loss. Any abortion medications delivered, dispensed, or distributed must be sold at cost, not to exceed list price, plus a fee of \$5 per dose to offset the cost of secure storage and delivery of medication. During the 2025 fiscal year, any abortion medications delivered, dispensed, or distributed must be sold at cost not to exceed list price. All revenue generated from the fee must be deposited into the State General Fund. Abortion medications are defined for these purposes as substances used in the course of medical treatment intended to induce the termination of a pregnancy, including mifepristone.

Mifepristone.

Mifepristone, sold as Mifeprex, and its generic are approved in a regimen with misoprostol to end an intrauterine pregnancy through 10 weeks gestation. The United States Food and Drug Administration (FDA) first approved Mifeprex in 2000 and approved the generic version in 2019. A Risk Evaluation and Mitigation Strategy (REMS) is a drug safety program that the FDA can require for certain medications with serious safety concerns to support safe use of the medication. Mifeprex and mifepristone tablets are available under a single, shared REMS, which sets forth the requirements that must be followed for medical termination of pregnancy through 10 weeks gestation.

Misoprostol.

Misoprostol is a synthetic prostaglandin that works by "replacing" prostaglandins. Misoprostol has a number of uses including reducing stomach acid and protecting the stomach lining from certain damage, inducing labor in certain circumstance, and treating post-partum hemorrhage. Misoprostol is also used in combination with mifepristone to end

early pregnancy and to treat early pregnancy loss.

**Summary of Bill:**

The DOC must coordinate with the Department of Health (DOH) to identify appropriate recipients of the abortion medications and prioritize bulk distribution to health care providers, Indian health care providers, and health care entities. The DOC may (and is no longer required to) obtain payment for delivering, dispensing, or distributing abortion medications.

The DOC may only sell, deliver, dispense, or distribute abortion medications to health care providers or entities that will only use the medications for providing reproductive health care, including for providing abortion care or medical management of early pregnancy loss. The definition of "abortion medications" is expanded to include the management of the full spectrum of reproductive health care and to specifically include misoprostol.

**Appropriation:** None.

**Fiscal Note:** Available.

**Effective Date:** The bill contains an emergency clause and takes effect immediately.

**Staff Summary of Public Testimony:**

(In support) This bill is a simple fix to ensure the Legislature's proactive efforts in 2023 can be fully realized. This bill clarifies how the stockpiled medication that has already been purchased can be made available if and when necessary, and names the DOH to play a supporting role to the DOC, whose function is for logistical and structural purposes only. The medication is housed in the DOC because it is the largest statewide, state-operated pharmacy. This bill is identical to the one the Committee passed out in January. There is no request that Washington purchase more medication at this time.

In 2023 the state purchased stockpiles of mifepristone and misoprostol, two medications that can be used for abortion and miscarriage management, and this medication was purchased as a safeguard against legal threats to access. This bill would remove restrictive conditions that currently make it difficult to distribute this medication and allows this medication to be donated to health care providers or sold at a lower cost than the original purchase price. This legislation ensures that Washington can maintain its standing as a leader for women's reproductive freedoms in the face of increasing restrictions and uncertainty across the country.

Medication abortion plays a critical role in ensuring timely access to care for people with high barriers, including those who are uninsured, underinsured, those who live far away from an abortion provider, or encounter long wait time for in-person appointments.

Mifepristone and misoprostol are extremely safe and effective and are only restricted for political reasons. Unfortunately, many patients in Washington still do not have local in-person access to mifepristone, even for pregnancy loss, due in large part to religious objections by large hospital systems. Washington has already decided to be a haven state for patients from other states, both through travel and through telemedicine and mail order.

Washington already spent the taxpayer dollars to stockpile the medication and is now letting it expire. With this bill, Washington will be able to sell or donate this medication to providers, pharmacies, and patients who need it now.

(Opposed) During the hysteria following the Dobbs decision, Washington foolishly purchased millions of dollars of abortion pills to be distributed through the DOC. Now the stockpile of unused drugs is about to expire, reinforcing the fact that the initial purchase was a costly mistake and probably the result of political grandstanding.

If the Bible is true, we collectively have a major problem on our hands, and that problem is the blood of the unborn. Life from the moment of conception has purpose, value, and future. Abortion pills steal life, purpose, and value. On a practical sense, it is far cheaper to destroy these medications than it would be to distribute them all over the state and continue with abortion sanctuary policies. The morally and fiscally responsible thing is to vote no on this bill.

The bill's proponents hope to give the drugs away for free through an emergency bill that would mandate bulk distribution of the drugs to unnamed and unknown appropriate recipients. Millions of taxpayer dollars were wasted on drugs meant to kill babies.

Since the bill provides for free distribution of the drug, it is probably unconstitutional, since Washington's Constitution specifically prohibits the State from making gifts. Hard-earned taxpayer dollars should be used to protect and nurture the care of the unborn, not to kill them.

Studies have shown that there are serious risks with abortion medications. The DOC is already overextended with staffing shortages, facility issues, and the core missions of safety and rehabilitation. Asking the DOC to perform public health functions risks undermining the core missions of safety and rehabilitation. That work belongs with agencies designed for public health, not corrections.

**Persons Testifying:** (In support) Samantha Grono, Washington State Women's Commission; Gabbi Nazari, Pro-Choice Washington; and Dr. Zoe Taylor.

(Opposed) Eric Lundberg; Theresa Schrempp; and Mary Long, Conservative Ladies of Washington.

**Persons Signed In To Testify But Not Testifying:** None.