

SENATE BILL REPORT

SB 5826

As of February 3, 2026

Title: An act relating to access at public postsecondary educational institutions to medication abortion.

Brief Description: Concerning access at public postsecondary educational institutions to medication abortion.

Sponsors: Senators Nobles, Alvarado, Chapman, Conway, Dhingra, Hasegawa, Lias, Pedersen, Riccelli, Saldaña, Shewmake, Slatter, Stanford, Trudeau, Valdez and Wilson, C..

Brief History:

Committee Activity: Higher Education & Workforce Development: 1/15/26, 1/22/26 [DP-WM, DNP].

Ways & Means: 2/03/26.

Brief Summary of Bill

- Requires public institutions of higher education to offer access to medication abortion through certain available methods with the student health center.
- Requires public institutions of higher education without a student health center to train current student support staff on information and referral services for medication abortion.
- Requires public institutions of higher education to maintain a webpage on reproductive health within an existing website.

SENATE COMMITTEE ON HIGHER EDUCATION & WORKFORCE DEVELOPMENT

Majority Report: Do pass and be referred to Committee on Ways & Means.
Signed by Senators Nobles, Chair; Hansen, Vice Chair; Slatter.

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 Report: Do not pass.

Signed by Senators Warnick, Ranking Member; Boehnke.

Staff: Kellee Gunn (786-7429)

SENATE COMMITTEE ON WAYS & MEANS

Staff: Michele Alishahi (786-7433)

Background: Public Institutions of Higher Education. Washington has six public baccalaureate institutions, and 34 community and technical colleges.

Medication Abortion. Medication abortion includes substances used during medical treatment intended to induce the termination of a pregnancy including, but not limited to, mifepristone.

Summary of Bill: Access to Medication Abortion. Beginning with the 2027-28 academic year, each public institution of higher education with a student health center must offer access to medication abortion through:

- a public program that connects patients in Washington to reproductive health services;
- a formal agreement with a safety net abortion provider with telehealth capabilities; or
- other available methods.

Student health centers that do not offer medication abortion services prior enactment of this bill must utilize the most cost-effective option to offer medication abortion services.

By the start of the 2027-28 academic year, each public institution of higher education that does not operate a student health center must provide information and referral services for medication abortion to students seeking such services. The institution must train current student support staff on the availability of certain public resources for student referral.

Webpage on Reproductive Health Services. All public institutions of higher education must maintain a comprehensive health services webpage on an existing website that provides clear, accessible information and resources regarding reproductive health services including, but not limited to, prenatal care and options for pregnancy termination. The webpage must include certain information including: scheduling appointments, certain existing campus resources, and an unbroken link and accurate description that directs students to the abortion page of the sexual and reproductive health section of the Department of Health's website.

Appropriation: None.

Fiscal Note: Available.

Creates Committee/Commission/Task Force that includes Legislative members: No.

Effective Date: Ninety days after adjournment of session in which bill is passed.

Staff Summary of Public Testimony (Higher Education & Workforce Development):

PRO: This bill is about meeting students where they are and making sure there are no barriers to attending school. Students should not have to choose between their health and their education.

This bill comes as a response from student advocacy. This bill outlines a clear outline for referral services for students who need care.

As a community college student, I believe having this access is critical to my community. Many of my classmates rely on the bus for transportation. This bill provides access and accommodation that is needed and will support students. Navigating off campus services as a student can be confusing and dangerous. On-campus support is critical and helps students get the care they need. More than half of the people who access medication abortion are in their 20s. Having abortion services on campus ensures safe access .

Having access will allow students to ask questions, get medically correct answers, and get basic healthcare.

The students know their campus, know its structures, and that will make a tangible difference in the lives of students.

CON: This bill is built on false premise. There are no barriers to access to abortion clinics in the state. Institutions of higher learning should not be forced to supply abortion related drugs. Postsecondary education is already far too expensive. The costs of this should not be borne on the institutions. The state should support responsible behavior, and this bill is unnecessary.

Abortion is not a part of essential healthcare. Pregnancy is not a disease or a burden. There is no personal accountability or recognition of personal choices in this bill. By granting a right to abort life, the rights of the developing person is not considered. Pregnancy is not shameful. Pregnant women should get the support needed to get through school while pregnant.

Shortly after graduating Western Washington University, I used abortion medication after a miscarriage. I bled a lot and needed medical care afterwards.

The language of this bill is misleading. Women have died using these drugs. Lack of support for pregnant women is needed. Many of the women who use this as an option hides the possible situation they may be in, such as domestic violence.

Persons Testifying (Higher Education & Workforce Development): PRO: Senator

T'wina Nobles, Prime Sponsor; Hailey Gray, Advocates for Youth; Sullivan Taylor, Advocates for Youth; Ahna Rader, Advocates for Youth; Clarisse Sandvik, Advocates for Youth; Isabelle Reksopuro, Advocates for Youth; Maya Arigala, Advocates for Youth.

CON: Theresa Schrempp; Eric Lundberg; Jean Hill, Washington State Catholic Conference; Nicole Peterson; Sunny Taylor; Mary Long, Conservative Ladies of America.

Persons Signed In To Testify But Not Testifying (Higher Education & Workforce Development): No one.

Staff Summary of Public Testimony (Ways & Means): PRO: Medication abortion is 97 percent effective and less than 1 percent of patients experience serious complications. This bill does not require campuses to construct separate buildings for students to access telehealth appointments on campus. Rather, schools are expected to direct students to any existing accessible spaces on their campuses if available.

The bill references existing provider directories, because there are several which are updated regularly online, avoiding any ongoing administrative burdens to campuses, including the Department of Health's website already referenced in the bill. On staffing, it was never meant to be read as all support staff. So we're proposing an amendment to specify at least one staff member or student worker.

We have data and case studies from campuses across the country who have implemented abortion services through their campus health centers. These campuses have reported that the only necessary cost associated with implementation is to procure the medications. One campus reported a total expenditure of \$884.25 for implementation, and another campus reported that costs totaled approximately \$500. We know that this bill can be implemented with low cost for Washington schools as well.

CON: There needs to be other choices given to our youth, abstinence, adoption, and helping them be a mother. I believe it's not the responsibility of schools or colleges to push abortions, unless it is going to be matched 100 percent with life. Students have testified on this bill that they saw their options, if pregnant, as limited to failing in college and having the baby or staying in college, and aborting the baby. As a state, we should be appalled that women still face barriers to achieving their higher education goals if pregnant. Rather than fund the right to take life, funds should be spent to ensure pregnant individuals have the same rights to work, to attend school, meet their basic needs, and to succeed as their non-pregnant peers.

Institutions of higher learning should not be forced to provide abortion drugs. Nor should tax payers be forced to pay for drugs to which many have a strong moral objection. Medication abortion is often described, as we've heard earlier, as extremely safe. The large-scale insurance claims data from 2017 through 2023 show that roughly one in 10 women experience serious complications, requiring medical intervention. This is not medicine. This

is a procedure that kills the innocent and inflicts trauma.

OTHER: I would encourage you to amend this bill if you're going to pass it to at least provide support for these women who are going through things that I went through. There should be help for you afterwards if you need it.

Persons Testifying (Ways & Means): PRO: Hailey Gray, Advocates for Youth; Charlie Brenner, Advocates for Youth; Tamara Marzouk, Advocates for Youth.

CON: Theresa Schrempp; Jean Hill, Washington State Catholic Conference; Matt LePage, First Baptist Church of Lacey; Mary Long, Conservative Ladies of Washington; Tina Gregory.

OTHER: Raquel Mendoza.

Persons Signed In To Testify But Not Testifying (Ways & Means): No one.