H-1642.1

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 5 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:

7 <u>NEW SECTION.</u> Sec. 1. A new section is added to chapter 48.43 8 RCW to read as follows:

9 (1) A health plan issued or renewed on or after January 1, 2026, that includes coverage for prescription hormone therapy must provide 10 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. If the prescription 16 hormone therapy is a controlled substance, the health plan must 17 provide reimbursement for the maximum refill allowed under state and 18 federal law to be obtained at one time by the enrollee. Any dispensing practices required by the health plan must follow clinical 19 20 guidelines for appropriate prescribing and dispensing to ensure the

1 health of the patient while maximizing access to effective 2 prescription hormone therapy.

3 (2) Nothing in this section prohibits a health plan from limiting 4 refills that may be obtained in the last quarter of the plan year if 5 a 12-month supply of the prescription hormone therapy has already 6 been dispensed during the plan year.

7 (3) Nothing in this section prohibits a prescribing provider from 8 temporarily limiting refills that may be obtained to a 90-day supply 9 at one time if the prescription hormone therapy is experiencing an 10 acute dispensing shortage during the plan year provided limits must 11 be rescinded at first opportunity of a regularly reinstated, 12 sustainable supply.

13 (4) To the extent not otherwise prohibited under this section or 14 state or federal law, health plans may apply drug utilization 15 management strategies to prescription drugs covered under subsection 16 (1) of this section.

17 (5) For purposes of this section, "prescription hormone therapy" 18 means all drugs approved by the United States food and drug 19 administration that are used to medically suppress, increase, or 20 replace hormones that the body is not producing at intended levels. 21 Prescription hormone therapy does not include glucagon-like peptide-1 22 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:

25 Each health plan that provides medical insurance offered under 26 this chapter, including plans created by insuring entities, plans not 27 subject to the provisions of Title 48 RCW, and plans created under 28 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, 29 30 48.43.550, 70.02.110, 70.02.900, 48.43.190, 48.43.083, 48.43.0128, 31 48.43.780, 48.43.435, 48.43.815, 48.200.020 through 48.200.280, 32 48.200.300 through 48.200.320, 48.43.440, section 1 of this act, and chapter 48.49 RCW. 33

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