

CERTIFICATION OF ENROLLMENT  
**ENGROSSED SUBSTITUTE HOUSE BILL 1971**

69th Legislature  
2025 Regular Session

Passed by the House March 8, 2025  
Yeas 58 Nays 38

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**Speaker of the House of  
Representatives**

Passed by the Senate April 16, 2025  
Yeas 40 Nays 9

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**President of the Senate**

Approved

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**Governor of the State of Washington**

CERTIFICATE

I, Bernard Dean, Chief Clerk of the House of Representatives of the State of Washington, do hereby certify that the attached is **ENGROSSED SUBSTITUTE HOUSE BILL 1971** as passed by the House of Representatives and the Senate on the dates hereon set forth.

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**Chief Clerk**

FILED

**Secretary of State  
State of Washington**

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**ENGROSSED SUBSTITUTE HOUSE BILL 1971**

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Passed Legislature - 2025 Regular Session

**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.

1            AN ACT Relating to increasing access to prescription hormone  
2 therapy to patients of all ages by requiring health plans to provide  
3 reimbursement for a 12-month refill of prescription hormone therapy  
4 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            NEW SECTION.    **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,  
10 that includes coverage for prescription hormone therapy must provide  
11 reimbursement for a 12-month refill of covered prescription hormone  
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. The 12-month refill  
16 requirement only applies to prescription hormone therapy that is able  
17 to be safely stored at room temperature without refrigeration. If the  
18 prescription hormone therapy is a controlled substance, the health  
19 plan must provide reimbursement for the maximum refill allowed under  
20 state and federal law to be obtained at one time by the enrollee. Any  
21 dispensing practices required by the health plan must follow clinical

1 guidelines for appropriate prescribing and dispensing to ensure the  
2 health of the patient while maximizing access to effective  
3 prescription hormone therapy.

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

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

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

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

24 **Sec. 2.** RCW 41.05.017 and 2024 c 251 s 5 and 2024 c 242 s 10 are  
25 each reenacted and amended to read as follows:

26 Each health plan that provides medical insurance offered under  
27 this chapter, including plans created by insuring entities, plans not  
28 subject to the provisions of Title 48 RCW, and plans created under  
29 RCW 41.05.140, are subject to the provisions of RCW 48.43.500,  
30 70.02.045, 48.43.505 through 48.43.535, 48.43.537, 48.43.545,  
31 48.43.550, 70.02.110, 70.02.900, 48.43.190, 48.43.083, 48.43.0128,  
32 48.43.780, 48.43.435, 48.43.815, 48.200.020 through 48.200.280,  
33 48.200.300 through 48.200.320, 48.43.440, section 1 of this act, and  
34 chapter 48.49 RCW.

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