SENATE BILL 5321

State of Washington 69th Legislature 2025 Regular Session

By Senators Nobles, Bateman, Chapman, Cleveland, Dhingra, Frame, Harris, Hasegawa, Krishnadasan, Lovelett, Lovick, Orwall, Riccelli, Salomon, Slatter, Stanford, Trudeau, Valdez, and C. Wilson

Read first time 01/17/25. Referred to Committee on Higher Education & Workforce Development.

- 1 AN ACT Relating to access at public postsecondary educational
- 2 institutions to medication abortion; and adding a new chapter to
- 3 Title 28B RCW.

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- 4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:
- 5 <u>NEW SECTION.</u> **Sec. 1.** The legislature finds and declares the following:
 - (1) Access to abortion is a human right, an integral part of essential health care, and vital for promoting public health.
 - (2) There are approximately 196,000 pregnancy capable students attending Washington's public institutions of higher education and many of these students need access to abortion services each year. A central mission of Washington's student health centers serving these institutions is to minimize the negative impact of health concerns on students' studies and to facilitate retention and graduation.
 - (3) Students seeking pregnancy termination face substantial travel, financial, and logistical barriers. Students must travel as far as 78 miles, or over four hours on public transit, round trip to the nearest abortion-providing facility, and the average wait time for an appointment is 10 days. The supreme court *Dobbs v. Jackson women's health organization* decision has increased the burden on abortion-providing facilities in the state, meaning longer wait times

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1 for students needing to access care. A 2024 report from senator Maria Cantwell's office states that clinics in Oregon have already seen a 2 50 percent increase in patients from Washington state traveling for 3 abortion care, and the average wait times in Washington for abortion 4 appointments in a Seattle area clinic have already increased by one 5 6 week due to the influx of patients traveling from out of state. These 7 financial and time burdens negatively impact academic performance, mental health, and physical health. 8

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- (4) Many of Washington's public institutions of higher education have student health centers, but only two campuses with student health centers are known to be in the process of implementing abortion services. Medication abortion is extremely safe, efficacious, and cost-effective. Research shows that the provision of medication abortion in student health centers is safe, effective, and feasible.
- (5) Because medication abortion is recognized as a safe and effective treatment for pregnancy termination and a health service every pregnant person in the state has the legal right to choose, it is the intent of the legislature that public institutions of higher education make medication abortion as accessible and cost-effective for students as possible.
- NEW SECTION. Sec. 2. The definitions in this section apply throughout this chapter unless the context clearly requires otherwise.
- 25 (1) "Council" means the Washington student achievement council as defined in RCW 28B.77.010.
- 27 (2) "Medication abortion" has the same meaning as 28 "abortion medications" in RCW 69.41.050.
- 29 (3) "Public institution of higher education" or "public 30 institutions of higher education" means institutions of higher 31 education as defined in RCW 28B.10.016.
- 32 (4) "Student health center" means a clinic or health center 33 providing physical health care services to students operated by 34 public institutions of higher education.
- NEW SECTION. Sec. 3. (1) By the start of the 2026-27 academic year, each student health center must offer access to medication abortion, either through a public program that connects patients in Washington to reproductive health services or through other delivery

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- methods. This service may be offered by providers at the student health center or through telehealth services, or by providers associated with a public program that connects patients in Washington to reproductive health services.
- 5 (2) By the start of the 2026-27 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:
- 10 (a) (i) Provide referrals to qualified health care providers who 11 can lawfully administer medication abortion;
- 12 (ii) Referrals must include the contact information for at least 13 two qualified health care organizations, including telehealth 14 organizations;
- 15 (b) Offer private and accessible space on campus for the student 16 to participate in telehealth appointments upon a student's request 17 for telehealth accommodation;
 - (c) Offer any necessary technical support for students using telehealth services, including reliable internet access; and
 - (d) Offer electronic devices to access telehealth services.
- 21 (3)(a) All institutions must maintain a comprehensive health 22 services website that provides clear, accessible information and 23 resources regarding reproductive health services including, but not 24 limited to, prenatal care and options for pregnancy termination.
 - (b) The website must include:

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- 26 (i) Detailed instructions for scheduling appointments, with 27 contact information for both pregnancy-related services and 28 behavioral health services; and
- 29 (ii) Links and contact information for campus resources that 30 assist students in requesting academic accommodations, including 31 absences, rescheduling exams, or adjusting other academic 32 requirements due to pregnancy, recovery from medical treatment, or 33 related conditions.
- NEW SECTION. Sec. 4. Sections 1 through 3 of this act constitute a new chapter in Title 28B RCW.

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