
SUBSTITUTE SENATE BILL 5916

State of Washington

69th Legislature

2026 Regular Session

By Senate Health & Long-Term Care (originally sponsored by Senators Harris, Chapman, and Saldaña)

READ FIRST TIME 01/28/26.

1 AN ACT Relating to nonopioid drugs for the treatment of pain;
2 amending RCW 48.43.400; reenacting and amending RCW 41.05.017; adding
3 a new section to chapter 48.43 RCW; adding a new section to chapter
4 74.09 RCW; and adding a new section to chapter 43.70 RCW.

5 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

6 NEW SECTION. **Sec. 1.** A new section is added to chapter 48.43
7 RCW to read as follows:

8 (1) A health plan issued or renewed on or after January 1, 2027,
9 shall provide coverage for at least one nonopioid drug for the
10 treatment or management of pain without prior authorization or step
11 therapy protocols.

12 (2) For the purposes of this section, "nonopioid drug" means a
13 drug or biological product that is indicated to produce analgesia
14 without acting on the body's opioid receptors and that has been
15 approved by the United States food and drug administration.

16 **Sec. 2.** RCW 41.05.017 and 2025 c 389 s 3 and 2025 c 171 s 2 are
17 each reenacted and amended to read as follows:

18 Each health plan that provides medical insurance offered under
19 this chapter, including plans created by insuring entities, plans not
20 subject to the provisions of Title 48 RCW, and plans created under

1 RCW 41.05.140, are subject to the provisions of RCW 48.43.500,
2 70.02.045, 48.43.505 through 48.43.535, 48.43.537, 48.43.545,
3 48.43.550, 70.02.110, 70.02.900, 48.43.190, 48.43.083, 48.43.0128,
4 48.43.780, 48.43.435, 48.43.815, 48.200.020 through 48.200.280,
5 48.200.300 through 48.200.320, 48.43.440, 48.43.845, 48.43.732,
6 section 1 of this act, and chapter 48.49 RCW.

7 NEW SECTION. **Sec. 3.** A new section is added to chapter 74.09
8 RCW to read as follows:

9 (1) Beginning January 1, 2027, a managed care organization shall
10 provide coverage for at least one nonopioid drug for the treatment or
11 management of pain without prior authorization or step therapy
12 protocols.

13 (2) The authority shall assure that any prescription drug
14 practices that it applies to fee-for-service programs and managed
15 care organizations under this chapter comply with the requirements of
16 subsection (1) of this section.

17 (3) For the purposes of this section:

18 (a) "Nonopioid drug" means a drug or biological product that is
19 indicated to produce analgesia without acting on the body's opioid
20 receptors and that has been approved by the United States food and
21 drug administration.

22 (b) "Prior authorization" has the same meaning as in RCW
23 48.43.400.

24 (c) "Step therapy protocol" has the same meaning as in RCW
25 48.43.400.

26 NEW SECTION. **Sec. 4.** A new section is added to chapter 43.70
27 RCW to read as follows:

28 By January 1, 2027, the department shall develop and publish on
29 its website an educational pamphlet regarding the use of nonopioid
30 alternatives for the treatment of pain. At a minimum, the pamphlet
31 must include:

32 (1) Information on available nonopioid alternatives for the
33 treatment of pain, including nonopioid medicinal drugs or drug
34 products and nonpharmacological therapies; and

35 (2) The advantages and disadvantages of the use of nonopioid
36 alternatives.

1 **Sec. 5.** RCW 48.43.400 and 2019 c 171 s 1 are each amended to
2 read as follows:

3 The definitions in this section apply throughout this section and
4 RCW 48.43.410 (~~and~~), 48.43.420, and section 1 of this act unless
5 the context clearly requires otherwise.

6 (1) "Clinical practice guidelines" means a systemically developed
7 statement to assist decision making by health care providers and
8 patients about appropriate health care for specific clinical
9 circumstances and conditions.

10 (2) "Clinical review criteria" means the written screening
11 procedures, decision rules, medical protocols, and clinical practice
12 guidelines used by a health carrier or prescription drug utilization
13 management entity as an element in the evaluation of medical
14 necessity and appropriateness of requested prescription drugs under a
15 health plan.

16 (3) "Emergency fill" means a limited dispensed amount of
17 medication that allows time for the processing of prescription drug
18 utilization management.

19 (4) "Medically appropriate" means prescription drugs that under
20 the applicable standard of care are appropriate: (a) To improve or
21 preserve health, life, or function; (b) to slow the deterioration of
22 health, life, or function; or (c) for the early screening,
23 prevention, evaluation, diagnosis, or treatment of a disease,
24 condition, illness, or injury.

25 (5) "Prescription drug utilization management" means a set of
26 formal techniques used by a health carrier or prescription drug
27 utilization management entity, that are designed to monitor the use
28 of or evaluate the medical necessity, appropriateness, efficacy, or
29 efficiency of prescription drugs including, but not limited to, prior
30 authorization and step therapy protocols.

31 (6) "Prescription drug utilization management entity" means an
32 entity affiliated with, under contract with, or acting on behalf of a
33 health carrier to perform prescription drug utilization management.

34 (7) "Prior authorization" means a mandatory process that a
35 carrier or prescription drug utilization management entity requires a
36 provider or facility to follow to determine if a service is a benefit
37 and meets the requirements for medical necessity, clinical
38 appropriateness, level of care, or effectiveness in relation to the
39 applicable plan.

1 (8) "Step therapy protocol" means a protocol or program that
2 establishes the specific sequence in which prescription drugs for a
3 specified medical condition will be covered by a health carrier.

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