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**SUBSTITUTE HOUSE BILL 1234**

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**State of Washington**

**65th Legislature**

**2017 Regular Session**

**By** House Health Care & Wellness (originally sponsored by Representatives Robinson, Lytton, Senn, Frame, Doglio, Tarleton, Hansen, Jinkins, Cody, Ortiz-Self, Riccelli, Stambaugh, Macri, Pollet, Tharinger, Clibborn, Stonier, Caldier, Sells, Gregerson, Wylie, Kilduff, McBride, Goodman, Bergquist, Ormsby, Stanford, Slatter, and Kloba)

1 AN ACT Relating to private health plan coverage of  
2 contraceptives; adding a new section to chapter 48.43 RCW; and  
3 creating a new section.

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

5 NEW SECTION. **Sec. 1.** The legislature finds that a significant  
6 percentage of pregnancies are unintended and could be averted with  
7 broader access to health care and effective contraception. Research  
8 suggests that moving from twenty-eight day dispensing of  
9 contraceptive drugs to twelve-month dispensing improves adherence to  
10 maintenance of the drugs and effective use of the contraceptives. It  
11 is therefore the intent of the legislature to require private health  
12 insurers to require dispensing of contraceptive drugs with up to a  
13 twelve-month supply provided at one time.

14 NEW SECTION. **Sec. 2.** A new section is added to chapter 48.43  
15 RCW to read as follows:

16 (1) A health benefit plan issued or renewed on or after January  
17 1, 2018, that includes coverage for contraceptive drugs must provide  
18 reimbursement for a twelve-month refill of contraceptive drugs  
19 obtained at one time by the enrollee, unless the enrollee requests a  
20 smaller supply or the prescribing provider instructs that the

1 enrollee must receive a smaller supply. The health plan must allow  
2 enrollees to receive the contraceptive drugs on-site at the  
3 provider's office, if available. Any dispensing practices required by  
4 the plan must follow clinical guidelines for appropriate prescribing  
5 and dispensing to ensure the health of the patient while maximizing  
6 access to effective contraceptive drugs.

7 (2) Nothing in this section prohibits a health plan from limiting  
8 refills that may be obtained in the last quarter of the plan year if  
9 a twelve-month supply of the contraceptive drug has already been  
10 dispensed during the plan year.

11 (3) For purposes of this section, "contraceptive drugs" means all  
12 drugs approved by the United States food and drug administration that  
13 are used to prevent pregnancy, including, but not limited to,  
14 hormonal drugs administered orally, transdermally, and  
15 intravaginally.

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