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**HOUSE BILL 1741**

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**State of Washington**

**69th Legislature**

**2025 Regular Session**

**By** Representatives Thai, Leavitt, Paul, Simmons, Couture, Parshley, Fey, Duerr, Nance, and Davis

Read first time 01/30/25. Referred to Committee on Health Care & Wellness.

1 AN ACT Relating to expanding access to treatment of pediatric  
2 autoimmune neuropsychiatric disorders associated with streptococcal  
3 infections and pediatric acute-onset neuropsychiatric syndrome; and  
4 adding a new section to chapter 48.43 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) For health plans other than health plans offered to public  
9 employees and dependents under chapter 41.05 RCW issued or renewed on  
10 or after January 1, 2026, health carriers shall provide initial  
11 coverage of three monthly immunomodulatory courses of intravenous  
12 immunoglobulin therapy for the treatment of pediatric autoimmune  
13 neuropsychiatric disorders associated with streptococcal infections  
14 and pediatric acute-onset neuropsychiatric syndrome, and subsequent  
15 courses as deemed medically necessary by the treating provider, when  
16 the following conditions are met:

17 (a) Clinically appropriate trials, which may be done  
18 concurrently, of two or more less intensive treatments were:

19 (i) Not effective;

20 (ii) Not tolerated; or

1 (iii) Did not result in sustained improvement in symptoms, as  
2 measured by a lack of clinically meaningful improvement on a  
3 validated instrument directed at the patient's primary symptom  
4 complex; and

5 (b) A pediatric subspecialist is consulted and the pediatric  
6 subspecialist and the patient's primary care provider recommend the  
7 treatment. For an adolescent or adult patient, the consultation may  
8 be with an adult subspecialist. The subspecialist consultation may be  
9 a teleconsultation.

10 (2) The health carrier may require that the patient be clinically  
11 reevaluated at three-month intervals.

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