
SUBSTITUTE SENATE BILL 5121

State of Washington

69th Legislature

2025 Regular Session

By Senate Health & Long-Term Care (originally sponsored by Senators Frame, Cleveland, Bateman, Cortes, Liiias, Nobles, Orwall, Pedersen, Riccelli, Saldaña, Valdez, Wellman, and C. Wilson)

READ FIRST TIME 02/21/25.

1 AN ACT Relating to providing coverage for the diagnosis of
2 infertility, treatment for infertility, and standard fertility
3 preservation services; adding a new section to chapter 48.43 RCW;
4 adding a new section to chapter 41.05 RCW; adding a new section to
5 chapter 74.09 RCW; and creating new sections.

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

7 NEW SECTION. **Sec. 1.** (1) The legislature finds that:

8 (a) According to the federal centers for disease control and
9 prevention, over 12 percent of women of reproductive age in the
10 United States have difficulty becoming pregnant or staying pregnant;

11 (b) Infertility is evenly divided between men and women and
12 approximately one-third of cases involve both partners being
13 diagnosed or are unexplained;

14 (c) Increasing accessibility for infertility treatment will
15 expand the state's health services and improve the short and long-
16 term health outcomes for the resulting children and mothers, which
17 may also reduce health care costs by reducing adverse outcomes; and

18 (d) Insurance coverage reduces disparities in access to care for
19 racial and ethnic minorities as well as for LGBTQ persons.

1 (2) The legislature, therefore, intends to provide coverage for
2 the diagnosis of and treatment for infertility, as well as for
3 standard fertility preservation services.

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

6 (1) Group health plans other than small group health plans issued
7 or renewed on or after January 1, 2026, must include coverage for
8 standard fertility preservation services.

9 (2) Group health plans other than small group health plans issued
10 or renewed on or after January 1, 2027, must include coverage for the
11 diagnosis of and treatment for infertility. Coverage must provide for
12 two completed oocyte retrievals with unlimited embryo transfers in
13 accordance with the guidelines of the American society for
14 reproductive medicine, using single embryo transfer when recommended
15 and medically appropriate.

16 (3) The benefits must be provided to enrollees, including covered
17 spouses and covered nonspouse dependents, to the same extent as other
18 pregnancy-related benefits.

19 (4) Group health plans other than small group health plans may
20 not include:

21 (a) Any exclusions, limitations, or other restrictions on
22 coverage of fertility medications that are different from those
23 imposed on other prescription medications;

24 (b) Any exclusions, limitations, or other restrictions on
25 coverage of any fertility services based on a covered individual's
26 participation in fertility services provided by or to a third party;
27 or

28 (c) Any deductibles, copayments, coinsurance, benefit maximums,
29 waiting periods, or any other limitations on coverage for the
30 diagnosis of infertility, treatment of infertility, and standard
31 fertility preservation services, except as provided in this section,
32 that are different from those imposed upon benefits for services not
33 related to infertility.

34 (5) For the purposes of this section:

35 (a) "Diagnosis of and treatment for infertility" means the
36 recommended procedures and medications from the direction of a
37 licensed physician, osteopathic physician, physician assistant, or
38 advanced registered nurse practitioner that are consistent with
39 established, published, or approved medical practices or professional

1 guidelines from the American college of obstetricians and
2 gynecologists or the American society for reproductive medicine.

3 (b) "Infertility" means a disease, condition, or status
4 characterized by:

5 (i) The failure to establish a pregnancy or to carry a pregnancy
6 to live birth after regular, unprotected sexual intercourse;

7 (ii) A person's inability to reproduce either as a single
8 individual or with the person's partner without medical intervention;

9 (iii) A licensed physician's, osteopathic physician's, physician
10 assistant's, or advanced registered nurse practitioner's findings
11 based on a patient's medical, sexual, and reproductive history, age,
12 physical findings, or diagnostic testing; or

13 (iv) Disability as an impairment of function.

14 (c) "Regular, unprotected sexual intercourse" means no more than
15 12 months of unprotected sexual intercourse for a woman under the age
16 of 35 or no more than six months of unprotected sexual intercourse
17 for a woman 35 years of age or older. Pregnancy resulting in
18 miscarriage does not restart the 12-month or six-month time period to
19 qualify as having infertility.

20 (d) "Standard fertility preservation services" means procedures
21 that are consistent with the established medical practices or
22 professional guidelines published by the American society of
23 reproductive medicine or the American society of clinical oncology
24 for a person who has a medical condition or is expected to undergo
25 medication therapy, surgery, radiation, chemotherapy, or other
26 medical treatment that is recognized by medical professionals to
27 cause a risk of impairment to fertility.

28 NEW SECTION. **Sec. 3.** A new section is added to chapter 41.05
29 RCW to read as follows:

30 (1) Health plans offered to employees and their covered
31 dependents under this chapter issued or renewed on or after January
32 1, 2026, must include coverage for standard fertility preservation
33 services.

34 (2) Health plans offered to employees and their covered
35 dependents under this chapter issued or renewed on or after January
36 1, 2027, must include coverage for the diagnosis of and treatment for
37 infertility. Coverage must provide for two completed oocyte
38 retrievals with unlimited embryo transfers in accordance with the

1 guidelines of the American society for reproductive medicine, using
2 single embryo transfer when recommended and medically appropriate.

3 (3) The benefits must be provided to enrollees, including covered
4 spouses and covered nonspouse dependents, to the same extent as other
5 pregnancy-related benefits.

6 (4) Health plans offered to employees and their covered
7 dependents under this chapter, may not include:

8 (a) Any exclusions, limitations, or other restrictions on
9 coverage of fertility medications that are different from those
10 imposed on other prescription medications;

11 (b) Any exclusions, limitations, or other restrictions on
12 coverage of any fertility services based on a covered individual's
13 participation in fertility services provided by or to a third party;
14 or

15 (c) Any deductibles, copayments, coinsurance, benefit maximums,
16 waiting periods, or any other limitations on coverage for the
17 diagnosis of infertility, treatment of infertility, and standard
18 fertility preservation services, except as provided in this section,
19 that are different from those imposed upon benefits for services not
20 related to infertility.

21 (5) For the purposes of this section:

22 (a) "Diagnosis of and treatment for infertility" means the
23 recommended procedures and medications from the direction of a
24 licensed physician, osteopathic physician, physician assistant, or
25 advanced registered nurse practitioner that are consistent with
26 established, published, or approved medical practices or professional
27 guidelines from the American college of obstetricians and
28 gynecologists or the American society for reproductive medicine.

29 (b) "Infertility" means a disease, condition, or status
30 characterized by:

31 (i) The failure to establish a pregnancy or to carry a pregnancy
32 to live birth after regular, unprotected sexual intercourse;

33 (ii) A person's inability to reproduce either as a single
34 individual or with the person's partner without medical intervention;

35 (iii) A licensed physician's, osteopathic physician's, physician
36 assistant's, or advanced registered nurse practitioner's findings
37 based on a patient's medical, sexual, and reproductive history, age,
38 physical findings, or diagnostic testing; or

39 (iv) Disability as an impairment of function.

1 (c) "Regular, unprotected sexual intercourse" means no more than
2 12 months of unprotected sexual intercourse for a woman under the age
3 of 35 or no more than six months of unprotected sexual intercourse
4 for a woman 35 years of age or older. Pregnancy resulting in
5 miscarriage does not restart the 12-month or six-month time period to
6 qualify as having infertility.

7 (d) "Standard fertility preservation services" means procedures
8 that are consistent with the established medical practices or
9 professional guidelines published by the American society of
10 reproductive medicine or the American society of clinical oncology
11 for a person who has a medical condition or is expected to undergo
12 medication therapy, surgery, radiation, chemotherapy, or other
13 medical treatment that is recognized by medical professionals to
14 cause a risk of impairment to fertility.

15 NEW SECTION. **Sec. 4.** A new section is added to chapter 74.09
16 RCW to read as follows:

17 (1) The authority shall provide coverage under this chapter for
18 standard fertility preservation services.

19 (2) The authority or any medicaid managed care organization may
20 not include:

21 (a) Any exclusions, limitations, or other restrictions on
22 coverage of fertility medications that are different from those
23 imposed on other prescription medications; or

24 (b) Any benefit maximums, waiting periods, or any other
25 limitations on coverage for standard fertility preservation services,
26 except as provided in this section, that are different from those
27 imposed upon benefits for services not related to infertility.

28 (3) For purposes of this section, "standard fertility
29 preservation services" means procedures that are consistent with the
30 established medical practices or professional guidelines published by
31 the American society of reproductive medicine or the American society
32 of clinical oncology for a person who has a medical condition or is
33 expected to undergo medication therapy, surgery, radiation,
34 chemotherapy, or other medical treatment that is recognized by
35 medical professionals to cause a risk of impairment to fertility.

36 NEW SECTION. **Sec. 5.** This act may be known and cited as the
37 Washington state building families act.

1 NEW SECTION. **Sec. 6.** The insurance commissioner may adopt rules
2 to implement, administer, and enforce section 2 of this act.

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