

SUBJECT: Allowing schools to stock asthma medicine and administer it to students

COMMITTEE: Public Health — favorable, without amendment

VOTE: 10 ayes — S. Thompson, Allison, Coleman, Frank, Guerra, Lucio, Ortega,
Price, Sheffield, Zedler

0 nays

1 absent — Wray

WITNESSES: For — Rebecca Harkleroad, Texas School Nurses Organization; Danielle Beachler; (*Registered, but did not testify*: Gregg Knaupe, American Lung Association; Bill Kelly, City of Houston Mayor's Office; Chris Masey, Coalition of Texans with Disabilities; Alyssa Thomason, Doctors for Change; Christine Yanas, Methodist Healthcare Ministries of South Texas Inc.; Troy Alexander, Texas Medical Association; Kevin Stewart, Texas Nurse Practitioners; Andrew Cates, Texas Nurses Association; Kaitlyn Doerge, Texas Pediatric Society; Darren Grissom, Texas PTA)

Against — None

On — (*Registered, but did not testify*: Manda Hall, Department of State Health Services)

BACKGROUND: Education Code ch. 38 subch. E concerns the maintenance, administration and disposal of epinephrine auto-injectors in schools. It outlines the creation of an advisory committee to review the administration of epinephrine auto-injectors and allows school districts, open-enrollment charter schools, and private schools to adopt policies regarding their use.

DIGEST: HB 2243 would amend Education Code ch. 38 subch. E to include the maintenance, administration, and disposal of asthma medicine.

The bill would allow a school district, open-enrollment charter school, or private school to adopt a policy authorizing a school nurse to maintain and

administer asthma medication to students. The policy would have to allow the school nurse to administer prescription asthma medication to a student only if the student's parent or guardian had provided written notification stating that the student had been diagnosed as having asthma and gave permission for the school to administer the asthma medicine. A school nurse would be allowed to administer asthma medication only on a school campus.

Rules. The bill would require the executive commissioner of the Health and Human Services Commission to consult with the commissioner of education and, as appropriate, the advisory committee, to adopt rules for the maintenance and administration of asthma medicine under a school policy.

These rules would be required to establish the amount of prescription asthma medicine available at each campus and the process for districts or schools to regularly check the inventory of asthma medicine for expiration and replacement. Asthma medicine would have to be stored in a secure and easily accessible location for the school nurse at each campus.

A school policy could not require the school to purchase asthma medicine or require any related expenditure that would have a negative fiscal impact on the district or school. Schools and districts adopting a policy would be required to provide written notice to the parent or guardian of each enrolled student before the implementation of the policy and before the start of each school year.

Prescription of asthma medicine. A physician or authorized prescriber could prescribe asthma medicine in the name of a school or district. The prescriber would be required to provide a standing order to the school allowing the administration of asthma medicine to a person reasonably believed to be experiencing a symptom of asthma whose parent or guardian had provided written notification and permission to the school nurse. The standing order would not be required to be patient-specific and would have to contain:

- the name and signature of the prescriber;
- the name of the school or district to which the order was issued;
- the quantity of asthma medicine to be obtained and maintained under the order; and
- the order's date of issue.

Liability. A person who in good faith acted or failed to act under the bill's provisions would be immune from civil or criminal liability or disciplinary action resulting from that action or inaction.

The bill would take immediate effect if finally passed by a two-thirds record vote of the membership of each house. Otherwise, it would take effect September 1, 2019.

SUPPORTERS
SAY:

HB 2243 would reduce the risk of hospitalization for students suffering asthma symptoms by allowing schools to stock emergency asthma medication. Stocking asthma medication in schools could prevent parents from having to pay large emergency bills and could provide treatment for uninsured and low-income students who may not own an inhaler.

The bill would allow certified school health professionals to address asthma symptoms as quickly as possible. Any delay in administering medicine could increase the risk of hospitalization or injury to a student. Currently, if a student forgets to bring a rescue inhaler to school and suffers asthma symptoms, schools do not have asthma medicine stocked to administer to the student, leading to calls to EMS and trips to the emergency room, which can impose large costs on parents and result in lost classroom time for students. This bill would help students and their parents or guardians avoid expensive and unnecessary emergency asthma treatment by rapidly providing needed medicine to students suffering from asthma.

OPPONENTS
SAY:

No concerns identified.