

LOS for EpiPen_Youth Camp Bill Final.pdf

Uploaded by: Beverly Lang

Position: FAV



Advocating for Maryland NPs since 1992

Bill: HB 0049 Public Health – Emergency and Allergy Treatment Program – Nurse Practitioners

Position: SUPPORT

Dear Chair, Vice-Chair, and Members of the Committee:

On behalf of the Nurse Practitioner Association of Maryland, Inc., (NPAM), the only professional association advocating solely for the over 8,011 certified Nurse Practitioners (NPs) licensed in Maryland, and the over 800 active members of NPAM, we are requesting your support for **HB 0049 Public Health – Emergency and Allergy Treatment Program – Nurse Practitioners**, which will add Certified Nurse Practitioners to the list of those healthcare providers authorized to prescribe, dispense, and administer epinephrine auto-injectors (EpiPen) in an emergency situation to licensed Maryland camps.

Nurse Practitioners (NPs) are registered nurses with advanced clinical training and education at the Master's or Doctoral level and have successfully passed a national certification exam. NPs have prescriptive authority according to the Annotated Code of Maryland and the Code of Maryland Regulations (COMAR). COMAR 10.27.03 authorizes the NP to personally prepare and dispense any drug that a NP is authorized to prescribe in the course of treating a patient.

It is critical for NPs to be added to the list of those healthcare providers that can prescribe, dispense, and administer life-saving medication such as epinephrine in the form of an auto-injector in the youth camp setting. NP's are already authorized to prescribe Epinephrine auto-injectors to licensed Maryland Schools in accordance with MSDE guidelines and the H.R. 2094 School Access to Epinephrine Act. However, the COMAR Emergency Allergy Treatment Program, specific to youth camps, excludes NPs.

In Maryland, there are over 725 camps that serve children ages 3.5 to 18 years old. Thirty-five (35) other states, including Virginia, Delaware, and Texas currently have legislation that allows NPs to prescribe, dispense and administer epinephrine to camps. When an Epinephrine auto-injector is available at camp, children who may have been unaware of a severe allergy to a food or a bee sting, can be quickly treated with life-saving emergency medication during their first exposure. Each year in the U.S., the Asthma and Allergy Foundation of America estimates severe reactions to food cause 30,000 emergency room visits, 2,000 hospitalizations, 150 deaths, and, at least 90 to 100 deaths occur in the United States each year due to insect sting anaphylaxis.¹

The Nurse Practitioner Association of Maryland, Inc.
5372 Iron Pen Place, Columbia, MD 21044
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www.NPAMonline.org

Early epinephrine administration is critical for survival in severe anaphylaxis, and allowing NPs to prescribe this medication directly to the camp will increase access to this life-saving medication to children and save lives.

Further, this bill provides NPs the same immunity as Physicians and Pharmacists who currently have immunity from a cause of action when acting in good faith to dispense the epinephrine and necessary paraphernalia.

Thank you for your support of **HB 0049 Public Health – Emergency and Allergy Treatment Program – Nurse Practitioners**. Please contact NPAM Executive Director Beverly Lang should you have questions.

Kindest Regards,

Beverly Lang MScN, RN, ANP-BC, FAANP

Executive Director,
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1. Asthma and Allergy Foundation, 2021. www.aafa.org/allergy-facts. Accessed November 1, 2021.

HB 49_MACC_FAV_B.Phillips.pdf

Uploaded by: Brad Phillips

Position: FAV



HOUSE HEALTH & GOVERNMENT OPERATIONS COMMITTEE

TESTIMONY

**Submitted by
Dr. Brad Phillips, Executive Director
Maryland Association of Community Colleges**

January 19, 2022

HB 49 – Public Health – Emergency and Allergy Treatment Program – Nurse Practitioner

Position: Support

The Maryland Association of Community Colleges, representing Maryland’s 16 public two-year institutions of postsecondary education, support this legislation that permits nurse practitioners to prescribe and dispense auto-injectable epinephrine. We find this ability a public health benefit that enhances the safety of those participating in our summer youth programs. MACC thanks Delegate Johnson for introducing this legislation.

MARYLAND ASSOCIATION OF COMMUNITY COLLEGES • 60 West St. Suite 200 • Annapolis, MD 21401

Phone: 410-974-8117 • Fax: 410-263-6425 • Web Site: MDACC.org

MD HB 49 AAFA letter of support.pdf

Uploaded by: Jenna Riemenschneider

Position: FAV



January 17, 2022

The Honorable Shane E. Pendergrass
Chair
Maryland General Assembly
Health and Government Operations Committee
241 Taylor House Office Building
6 Bladen Street
Annapolis, MD 21401

The Joseline A. Pena-Melnyk
Vice Chair
Maryland General Assembly
Health and Government Operations Committee
241 Taylor House Office Building
6 Bladen Street
Annapolis, MD 2140

Dear Chair Pendergrass and Vice Chair Pena-Melnyk

On behalf of the Asthma and Allergy Foundation of America (AAFA) and the more than 32 million Americans living with life-threatening food allergies, I am writing to express AAFA's strong support for H.B. 49 an act concerning Public Health – Emergency and Allergy Treatment Program – Nurse Practitioners.

AAFA is the leading patient organization for people with asthma and allergies, and the oldest asthma and allergy patient organization in the world. Kids With Food Allergies, a division of AAFA, offers tools, education, and community to families and children coping with food allergies across the country.

Food allergies are affecting a growing number of American children and adults. Approximately 7 percent of all children in the U.S. have food allergies. Exposure to the allergen can cause severe reactions, including anaphylaxis and, in rare cases, death. Because there is no cure for food allergies, awareness and preparedness are key for protecting health and saving lives.

Epinephrine is the only treatment for anaphylaxis and is only available with a prescription. Children and adults who have severe food allergies need epinephrine with them at all times to promptly treat anaphylaxis. In situations where a camper does not have access to epinephrine (they may not have their prescribed auto-injector with them, or they could be experiencing their first-ever reaction to a certain allergen), the reaction can become life-threatening. The added protection H.B. 49 provides by allowing nurse practitioners to prescribe and dispense epinephrine autoinjectors to authorized certificate holders who operate youth camps to treat someone suffering anaphylaxis, even for their very first allergic reaction, is life-saving.

One preventable death is one too many. Thank you very much for your time and consideration. We are grateful for your concern for the safety of those managing food allergies.

Sincerely,

President and Chief Executive Officer
Asthma and Allergy Foundation of America

FinalHB0049letter of support2 .pdf

Uploaded by: Lindsay Ward

Position: FAV



Support: HB 0049 Public Health- Emergency and Allergy Treatment Program- Nurse Practitioners.

1/14/2022

Maryland House of Delegates
Health and Government Operations Committee
House Office Building
6 Bladen Street
Annapolis, Maryland 21401

Dear Chair, Vice-Chair and Members of the Committee:

On behalf of the pediatric nurse practitioners (PNPs) and fellow pediatric-focused advanced practice registered nurses (APRNs) of the National Association of Pediatric Nurse Practitioners (NAPNAP) Chesapeake Chapter, I am writing to express our support of **HB 0049 Public Health- Emergency and Allergy Treatment Program- Nurse Practitioners**. This bill will add Certified Nurse Practitioners to the legal list of authorized health care providers to prescribe, dispense and administer epinephrine (Epipen) injectors in an emergent situation at licensed camps in Maryland.

The current COMAR Emergency Allergy treatment program only designates physicians the authorization to prescribe epinephrine at youth camps. Nurse Practitioners need to be added to this regulation. Nurse Practitioners have advanced education, certification and training that allows them to prepare, prescribe and administer medications including epinephrine. Nurse Practitioners prescribe and administer epinephrine in school-based settings all over Maryland.

According to the Allergy and Asthma Network one in 12 children have food allergies and 25 percent of allergic reactions occur without a previous diagnosis. In addition, there are 150 to 200 annual fatalities from food allergies and 40 fatalities from insect stings. There are over 725 youth camps that serve children in Maryland. Having epinephrine available at these camps is essential. Children may experience a life-threatening severe allergy (i.e. food allergy or bee sting) for the first time while away at these camps. Giving epinephrine early is cornerstone for successful management of anaphylaxis and for survival when severe anaphylaxis occurs.

Passage of this bill will protect pediatric patients by increasing access to lifesaving medication and save lives. For these reasons the Maryland Chesapeake Chapter of NAPNAP extends their support to we urge you to support **HB 0049 Public Health- Emergency and Allergy Treatment Program- Nurse Practitioners**.

The pediatric advanced practice nurses of your state are grateful to you for your attention to these crucial issues. The members of Chesapeake Chapter of the National Association of Pediatric Nurse Practitioners are committed to improving the health and advocating for of Maryland's pediatric patients. If we can be of any further assistance, or if you have any questions, please do not hesitate to contact Deborah Busch, the Chesapeake Chapter President at 410-614-6284 or dbusch1@jhu.edu.

Sincerely,

Deborah W. Busch DNP, CRNP, ABCCLC, CNE, FAANP



Deborah W. Busch DNP, CRNP, FAANP ASSISTANT PROFESSOR
Certified Registered Nurse Practitioner- Pediatric Primary Care
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Lindsay J. Ward CRNP, RN, IBCLC, MSN, BSN
National Association of Pediatric Nurse Practitioners (NAPNAP)
Chesapeake Chapter President Elect and Legislative Co-Chair

Linda Aveni Murray, DNP, CRNP-Ped

Linda Aveni Murray, DNP, CRNP-Ped
National Association of Pediatric Nurse Practitioners (NAPNAP)
Chesapeake Chapter Legislative Co-Chair

Green Acres Letter.pdf

Uploaded by: Mark Ubbens

Position: FAV



January 12, 2022

To Whom It May Concern;

I am writing this letter because I strongly believe Nurse Practitioners should be able to authorize and provide Epi-pen to camp communities.

Last summer, Green Acres Day Camp had two incidents where a counselor needed an Epi-pen to save her life. The counselor was stung by a bee, but did not know she was allergic to bees. While waiting for the emergency response team to arrive on campus, the Camp's health staff received authorization from the Camp's Nurse Practitioner to administer an Epi-pen to the counselor, This saved her life! The allergic reaction subsided by the time the ambulance arrived and her breathing was back to normal. Unfortunately, later in the week, the same counselor was stung again. At this time, the Camp's health staff had to administer another Epi-pen authorized by the Camp's Nurse Practitioner.

Thus, I strongly support his bill should be passed because Nurse Practitioners can help ensure that all camps have Epi-pens available to save the lives of our children.

Sincerely,
Marylouise Bracho

Marylouise Bracho
Camp Director

Green Acres School Summer Camp
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National Aquarium Support Letter.pdf

Uploaded by: Mark Ubbens

Position: FAV



501 East Pratt Street
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P: 410-576-3800
aqua.org

January 17, 2022

To Whom It May Concern;

I am writing this letter because I strongly believe Nurse Practitioner's should be able to authorize and provide Epi-pen to camp communities.

Part of our camp experience is taking students on outdoor adventures, often away from our main campus and from medical care. One of the things that is always on our mind is if a camper or staff would have an allergic reaction (from a bee sting, etc) that causes anaphylaxis that they were unaware of and being far away from medical professionals. Having an Epi-pen that could be provided to the camp to use in emergency circumstances would be greatly beneficial and relieve some of the worry about being prepared for medical emergencies involving anaphylaxis from an allergen. Our staff has been well-trained of what to do in emergency situations but would greatly benefit from having this additional resource in our backpack of care.

I strongly support his bill should be passed because Nurse Practitioner's can help ensure that all camps have Epi-pens available to assist in providing emergency medical care to both our campers and staff.

Sincerely,

Lauren Fauth
Manager of Education Programs/Camp Director

2022 MNA HB 49 House Side.pdf

Uploaded by: Rosemary Mortimer

Position: FAV



Committee: House Health and Government Operations Committee
Bill Number: House Bill 49
Title: Public Health – Emergency and Allergy Treatment Program – Nurse Practitioners
Hearing Date: January 20, 2022
Position: Support

The Maryland Nurses Association (MNA) supports *House Bill 49 – Public Health – Emergency and Allergy Treatment Program – Nurse Practitioners*. The bill will support youth camps in ensuring the health and safety of their campers.

Under current law, youth camps may obtain a Department of Health certificate to obtain auto-injectable epinephrine to use in cases of emergency allergic reactions. To obtain the certificate, youth camps must meet requirements set by the Maryland Department of Health. Youth camps can then obtain auto-injectable epinephrine by prescription from a physician but not from a nurse practitioner. This limitation is both outdated and impractical. Nurse practitioners are often the consulting provider to youth camps. The bill proposes to revise the law to recognize nurse practitioners may also prescribe auto-injectable epinephrine to youth camps with Department of Health certificates.

Thank you for your consideration of our testimony, and we urge a favorable report. If we can provide any further information, please contact Robyn Elliott at relliott@policypartners.net.

2 - HB 49 - HGO - MBON - SWA.docx.pdf

Uploaded by: Heather Shek

Position: FWA



Board of Nursing

Larry Hogan, Governor · Boyd K. Rutherford, Lt. Governor · Dennis R. Schrader, Acting Secretary

January 19, 2022

The Honorable Shane E. Pendergrass
Chair, Health and Government Operations Committee
Room 241 House Office Building
Annapolis, MD 21401-1991

RE: HB 49 – Public Health – Emergency and Allergy Treatment Programs – Nurse Practitioners – Letter of Support with Amendments

Dear Chair Pendergrass:

The Maryland Board of Nursing (“the Board”) respectfully submits this letter of support with amendments for House Bill (HB) 49 – Public Health – Emergency and Allergy Treatment Program – Nurse Practitioners. This bill authorizes nurse practitioners to prescribe and dispense auto-injectable epinephrine to certain certificate holders who operate youth camps.

Certified Registered Nurse Practitioners (CRNPs), under Maryland Annotated Code’s Health Occupations Articles §8-508 and §8-512, are “authorized to prescribe, personally prepare, and dispense drugs”. The Code of Maryland Regulations (COMAR) Subtitle 27, additionally allows CRNPs to “independently prescribe, personally prepare, and dispense any drug that is authorized to be prescribed in the course of treating a patient”.¹²

In order to be certified to practice in the state of Maryland, CRNPs are required to complete a master’s or doctoral degree program and have clinical training beyond their initial registered nurse (RN) preparation. Didactic and clinical courses prepare CRNPs with specialized knowledge and clinical competency to practice in primary care, acute care, and long-term health care settings. To be recognized as an independent practitioner with full practice authority, CRNPs must undergo rigorous national certification, periodic peer review, and clinical outcome evaluations.

The Board is in strong support of expanding a CRNPs authority to prescribe and dispense auto-injectable epinephrine to the youth camp setting. The Board believes early epinephrine administration to be critical for individuals who suffer from severe adverse

¹ [COMAR 10.27.07.03](#) Nurse Practitioner – Scope and Standards of Practice

² [COMAR 10.27.07.07](#) Preparing and Dispensing

reactions/anaphylaxis. Allowing CRNPs the ability to prescribe this medication directly to the camp will increase access to this life-saving medication for children.

To stay in compliance with Title 8 of the Health Occupations Article, the Board is requesting to amend the title of NURSE PRACTITIONER TO **REGISTERED** NURSE PRACTITIONER within the legislative language. An example has been provided below your review.

Section 13-701. On page 1. Line 20.

“...insect stings when physician [services], **REGISTERED** NURSE PRACTITIONER, or emergency medical...”

Section 13-702. On page 2. Lines 20 – 23.

(G) “**REGISTERED** NURSE PRACTITIONER” **HAS THE MEANSING STATED IN §8-101**
~~AN INDIVIDUAL LICENSED TO PRACTICE REGISTERED NURSING IN THE STATE
AND WHO IS CERTIFIED AS A NURSE PRACTITIONER BY THE STATE BOARD OF
NURSING UNDER TITLE 8 OF THE HEALTH OCCUPATIONS ARTICLE.~~

For the reasons discussed above, the Board of Nursing respectfully submits this letter of support with amendments for HB 49.

I hope this information is useful. For more information, please contact Iman Farid, Health Policy Analyst, at (410) 585 – 1536 (iman.farid@maryland.gov) or Rhonda Scott, Deputy Director, at (410) 585 – 1953 (rhonda.scott2@maryland.gov).

Sincerely,



Gary N. Hicks
Board President

The opinion of the Board expressed in this document does not necessarily reflect that of the Department of Health or the Administration.

MAJ Position Paper -- HB 49 - FWA - NP Camps.pdf

Uploaded by: Josh Howe

Position: FWA



Maryland Association for Justice, Inc.

2022 Position Paper

HB 49 - Public Health - Emergency and Allergy Treatment Program - Nurse Practitioners

FAVORABLE WITH AMENDMENTS

HB 49 authorizes nurse practitioners to prescribe and dispense auto-injectable epinephrine to certain certificate holders who operate youth camps in emergencies to persons experiencing anaphylaxis. In the 2018 Session, the Health and government Operations and Senate Finance Committees heard testimony on a similar bill, SB 1473/ CH 527, that was ultimately codified with amendments.

Central to HB 49 is a legislative grant of immunity: causes of action for civil liability “may not arise” against certificate holders who participate in the program and negligently cause harm. § 13-707 (page 3). MAJ respectfully submits that a legislative grant of immunity under these circumstances would be bad public policy, because victims of negligent conduct, including minor children, lose their chance to get justice in court.

There is no need for the broad civil immunity included in HB 49. Youth camps are insured against liabilities arising from the provision of services they provide. Unfortunately, under HB 49, a youth camp could negligently refrigerate EpiPens, or allow EpiPens to expire (they are good for just one year), and persons experiencing anaphylaxis who are injured as a result would have no recourse in court.

The Maryland Association for Justice respectfully requests amendments to HB 49, to provide necessary protection for individuals who are treated with auto-injectable epinephrine for an anaphylactic reaction. MAJ encourages the Committee to conform HB 49 to the recently codified provisions in Subtitle 7A under Title 13 of the Health General Article (outlined in CH 527- 2018). HB 49 should require participating youth camps to follow the manufacturer’s instructions with respect to storage, and only maintain supplies of unexpired auto-injectable epinephrine for use under the expansion created by HB 49. If the purpose of HB 49 is to protect individuals who suffer an unexpected anaphylactic reaction, then HB 49 should not deprive those same individuals of their right to hold negligent actors accountable in court, if their negligence causes them to suffer harm.

Attached Page 2 – Amendments to HB 49

**The Maryland Association for Justice respectfully urges a
Favorable with Amendments Report**



Maryland Association for Justice, Inc.

2022 Position Paper

MAJ HB 49 – 2022 Amendment Part 1

Insert the following new underlined language in §13–705 on Page 3 after line 7 of HB 49.

(2) Possess and store prescribed auto–injectable epinephrine and the necessary paraphernalia for the administration of auto–injectable epinephrine

(I) IN ACCORDANCE WITH THE MANUFACTURER’S INSTRUCTIONS; AND

(II) IN A LOCATION THAT IS READILY ACCESSIBLE TO EMPLOYEES OR AFFILIATED INDIVIDUALS IN AN EMERGENCY SITUATION.

(3) A YOUTH CAMP THAT OPERATES WITH A VALID CERTIFICATE AS DEFINED IN §13–705 SHALL DESIGNATE THE EMPLOYEES WHO ARE CERTIFICATE HOLDERS OR DESIGNATED AFFILIATED INDIVIDUALS WHO ARE CERTIFICATE HOLDERS WHO WILL BE RESPONSIBLE FOR THE STORAGE, MAINTENANCE, AND CONTROL OF THE SUPPLY OF AUTO–INJECTABLE EPINEPHRINE.

(4) A YOUTH CAMP MAY NOT OBTAIN OR STORE AUTO–INJECTABLE EPINEPHRINE UNLESS YOUTH CAMP HAS AT LEAST TWO EMPLOYEES OR DESIGNATED AFFILIATED INDIVIDUALS WHO ARE CERTIFICATE HOLDERS.

(5) A YOUTH CAMP SHALL MAINTAIN A COPY OF THE CERTIFICATE ISSUED TO AN EMPLOYEE OR A DESIGNATED AFFILIATED INDIVIDUAL UNDER § 13–702 OF THIS SUBTITLE.

MAJ HB 49 – 2022 Amendment Part 2

Insert the following revisions to § 13-707, beginning on Page 3, Line 12 of HB 49

§ 13-707

(a) **(1) A-EXCEPT AS PROVIDED IN PARAGRAPH (2) OF THIS SUBSECTION, A** cause of action may not arise against a certificate holder or agent authorized under this subtitle for any act or omission when the certificate holder or agent is acting in good faith while administering auto-injectable epinephrine to an individual experiencing or believed by the certificate holder or agent to be experiencing anaphylaxis, except where the conduct of the certificate holder or agent amounts to gross negligence, willful or wanton misconduct, or intentionally tortious conduct.

(2) THE PROVISIONS OF PARAGRAPH (1) OF THIS SUBSECTION DO NOT APPLY IF A CERTIFICATE HOLDER OR A YOUTH CAMP THAT MAKES AVAILABLE, OR A CERTIFICATE HOLDER WHO ADMINISTERS, AUTO–INJECTABLE EPINEPHRINE TO AN INDIVIDUAL WHO IS EXPERIENCING OR IS BELIEVED BY THE CERTIFICATE HOLDER OR AUTHORIZED ENTITY TO BE EXPERIENCING ANAPHYLAXIS:



Maryland Association for Justice, Inc.

2022 Position Paper

(I) FAILS TO FOLLOW STANDARDS AND PROCEDURES FOR STORAGE AND ADMINISTRATION OF AUTO-INJECTABLE EPINEPHRINE; OR

(II) ADMINISTERS AUTO-INJECTABLE EPINEPHRINE THAT IS BEYOND THE MANUFACTURER'S EXPIRATION DATE.

(b)

(1) A cause of action may not arise against any physician for any act or omission when the physician in good faith prescribes or dispenses auto-injectable epinephrine and the necessary paraphernalia for the administration of auto-injectable epinephrine to a ~~person certified by the Department~~ **CERTIFICATE HOLDER OR YOUTH CAMP** under this subtitle.

(2) A cause of action may not arise against any pharmacist for any act or omission when the pharmacist in good faith dispenses auto-injectable epinephrine and the necessary paraphernalia for the administration of auto-injectable epinephrine to a ~~person certified by the Department~~ **CERTIFICATE HOLDER OR YOUTH CAMP** under this subtitle.

(3) A CAUSE OF ACTION MAY NOT ARISE AGAINST ANY NURSE PRACTITIONER FOR ANY ACT OR OMISSION WHEN THE NURSE PRACTITIONER IN GOOD FAITH DISPENSES AUTO-INJECTABLE EPINEPHRINE AND THE NECESSARY PARAPHERNALIA FOR THE ADMINISTRATION OF AUTO-INJECTABLE EPINEPHRINE TO A ~~PERSON CERTIFIED BY THE DEPARTMENT~~ CERTIFICATE HOLDER OR YOUTH CAMP UNDER THIS SUBTITLE.

(c) Scope of section. -- This section does not affect, and may not be construed as affecting, any immunities from civil liability or defenses established by any other provision of the Code or by common law to which a volunteer, physician, or pharmacist may be entitled.