



# Montgomery County

## Office of Intergovernmental Relations

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**HB86**

**DATE: January 25, 2024**

**SPONSOR: Delegates Boyce, Lehman, McCaskill and Ruth**

**ASSIGNED TO: Ways and Means**

**CONTACT PERSON: Leslie Frey**

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**POSITION: FAVORABLE WITH AMENDMENTS (Department of Health and Human Services)**

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**Public and Nonpublic Schools - Auto-Injectable Epinephrine and Bronchodilators - Use, Availability, Training, and Policies**

Among other provisions, House Bill 86 requires school nurses and other personnel identified by school nurses to receive a paid professional development training on identifying the symptoms of anaphylaxis, asthma and respiratory distress and distinguishing between anaphylaxis and asthma or respiratory distress. The bill requires each local county board of education to develop a policy for the emergency administration of auto-injectable epinephrine by a school nurse or designated volunteer but does not clarify that the person administering the auto-injectable epinephrine has received the training identified by the bill. The bill further directs each local board of education to establish a policy to authorize school nurses and other school personnel to administer a bronchodilator to a student who is determined by an individual who has undergone the required training that the student has asthma, is experiencing asthma-related symptoms, or is perceived to be in respiratory distress, regardless of whether the student has received a diagnosis of asthma or reactive airway disease from a health care professional or whether the student has been prescribed a bronchodilator by an appropriate health care provider. The provision of the bronchodilator medication is then to be documented and reported to the student's parents or legal guardian and the Maryland State Department of Education.

Montgomery County Department of Health and Human Services (MCDHHS) supports the intent of HB 86 to ensure that students have access to life-saving medication when medically necessary. However, the bill presents unfunded mandates on local agencies and places administrative burden on school nurses.

MCDHHS concurs with the Maryland Association of County Health Officers' testimony and requests amendments to remove the requirement to report incidents of bronchodilator usage to parents and MSDE. Additionally MCDHHS respectfully requests that the requirement that school nurses and other personnel receive paid professional development training on the symptoms of anaphylaxis, asthma and respiratory distress be removed. While bronchodilator administration is safe for students, the administration of it under the bill may result in a delay of the administration of lifesaving epinephrine for a student experiencing anaphylaxis if trained staff do not correctly distinguish between anaphylaxis and asthma. Further, students who receive bronchodilator medication who return to the classroom will be monitored by teaching staff who will likely not be trained to identify symptoms that may indicate deteriorating health status. Because of the already overburdened status of school health nurses coupled with the impracticality of training every teacher in our schools, the unfunded mandate to only train some school personnel, at a cost to the local health departments, does not resolve the issue of properly administering medication that the bill aims to address. Instead of relying on less experienced proxies to identify anaphylaxis, asthma and related symptoms, efforts should be made to correct the school nurse shortage and improve access to pediatric primary care and in school-based settings. Finally, MCDHHS respectfully requests that the bill be amended to ensure that only students who have been prescribed a bronchodilator by an appropriate health care provider are administered a bronchodilator by school health nurses or school personnel designated by a school health nurse.