

Testimony of the American Lung Association In favor of Assembly Bill 914 In front of the Assembly Committee on Health, Aging and Long-Term Care

Chair Moses and members of the committee,

Good morning. My name is Molly Collins, and I am the advocacy director in Wisconsin for the American Lung Association, the oldest voluntary public health organization in the United States. Thank you for the opportunity to provide comments on AB 914 sponsored by Representative Snyder. The American Lung Association strongly supports this bill as it will allow schools in Wisconsin to provide more immediate access to medications for students with asthma or suffering from respiratory distress. Asthma can be a deadly disease if flare-ups are not treated immediately. This bill has the potential to save lives and keep kids safe in schools.

The American Lung Association is the leading organization working to save lives by improving lung health and preventing lung disease, through research, education and advocacy. This bill aligns with one of our strategic imperatives: to reduce the burden of lung disease on individuals and their families.

Asthma impacts millions of lives and has a tremendous impact on our nation's healthcare system and economy. In the U.S., over 25 million Americans, including 5.1 million children have asthma. In Wisconsin, 50,725 children have asthma. Asthma is also responsible for more than \$80 billion annually in economic costs and causes more than 5.2 million missed school days and 8.7 million missed days of work nationwide.

Because asthma attacks can occur anytime and often without warning, children with asthma should always have access to medication that can quickly reverse the blockages in their lungs. This life-saving medication, called a short-acting bronchodilator, is easy to administer, inexpensive, and very safe.

Unfortunately, when children do not have asthma medication, which can occur for a variety of reasons such as forgetting it or not being able to afford it, schools have few options. A parent may not be immediately accessible or close enough to respond promptly. Even if they can, there is a delay during which the asthma attack often gets worse. In such cases, the school must call 911. Doing so is likely to lead to an ambulance transport costing \$500 or more and an emergency department visit costing thousands more. Such events also take children out of the classroom for days at a time and further impede their learning.

These adverse events are largely avoidable with a simple low-cost solution: stock medication or inhalers. Schools can purchase a single inhaler containing a short-acting bronchodilator along with spacers that can be used for anyone who experiences the sudden onset of cough, shortness-of-breath, and chest tightness that signals an asthma attack.

It is critical as outlined in the proposed legislation that school staff other than school nurses are trained in the signs and symptoms of asthma and when it is appropriate to administer the

rescue medications. Unfortunately, in Wisconsin there is not a school nurse present in every school building. The Lung Association recognizes having a nurse in every school building is a significant need and we would be happy to support such an initiative. However, because of the safety of the medication used and the life-threatening implications of an asthma attack, we believe it is imperative that we train other staff to assess, access and administer the required medication that would potentially save a student's life.

This legislation also provides important liability protection for the prescriber, the school and the person who administers the medication in good faith. As mentioned before the medication used for treatment of asthma attacks is safe and effective. In addition, as part of a research project in the Sunnyside Unified School District in Tucson, Arizona that evaluated a stock asthma inhaler project there, researchers found that school nurses were afraid that giving the medication could potentially expose them to liability, so it is imperative that the liability protections as outlined in the bill remain.

AB 914 represents a simple and low-cost solution to a problem that could save both lives and money. In total, <u>17 states</u> have passed legislation or have administrative guidelines in place allowing schools to stock asthma medications. We have worked closely with Representative Snyder to truly make this a model bill that Wisconsin can be proud of.

The Lung Association thanks the committee for their continued commitment to the health and wellbeing of the residents of our state and the desire to protect Wisconsin's students. The Lung Association strongly supports AB 914 as drafted and encourages swift action to move the bill out of committee and passage by the Assembly and Senate.

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CDC. 2019 National Health Interview Survey.

^{*} Table C1: Child Current Asthma Prevalence and Weighted Number by State or Territory: BRFSS 2019 | CDC

Nurmagambetov TA, Kuwahara R, Garbe P. The Economic Burden of Asthma in the United States, 2008-2013. Annals of the American Thoracic Society, 2018; doi: 10.1513/AnnalsATS.201703-259OC.