

STATE OF HAWAII
DEPARTMENT OF HEALTH
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**Testimony in SUPPORT of HB0903 HD1
RELATING TO STUDENT HEALTH**

REPRESENTATIVE GREGG TAKAYAMA, CHAIR
HOUSE COMMITTEE ON HEALTH

Hearing Date: February 12, 2025 @ 10 am

Room Number: 329

1 **Fiscal Implications:** None

2 **Department Position:** The Department of Health supports this measure offering comments.

3 **Department Testimony:** The Communicable Disease and Public Health Nursing Division
4 (CDPHND) provides the following testimony on behalf of the Department.

5 This measure provides the option of a stock supply of bronchodilators at schools and allows for
6 employees and agents of a school to volunteer to administer emergency medications such as
7 bronchodilators, epinephrine, and glucagon, and seizure rescue medications and conduct
8 diabetes related tasks such as assistance with diabetes testing, blood glucose, and
9 administration of insulin.

10 The Department has concerns with some of the changes to the medication administration
11 section of the bill (Section 1 302A-B), particularly around the definition of the scope of this
12 program. The current definition of School (HRS 302A-901) “means any day care center, child
13 care facility, HeadStart program, preschool, kindergarten, or elementary or secondary school,
14 public or private, including any special school for children in the state.” If this measure was to
15 be enacted, the Department of Health does not have the resources to expand its current
16 consultative services to the Department of Education to all schools included in the broader
17 definition.

1 The Department also has concerns about the provision to allow volunteers to administer
2 insulin. The Department recognizes that students with diabetes take insulin at scheduled times
3 based on their personal diabetes plan and healthcare professional recommendations and when
4 the student is experiencing hyperglycemia. However, insulin administration requires specific
5 training and carries some risks. Currently, the Department of Health does not have the
6 resources to expand to insulin administration training for volunteers.

7 **Offered Amendments:**

- 8 • Section 1, 302A-B (b) Page 4, line 1: add the word “public,” “(b) Employees and agents
9 of a public school, including”.

10 Thank you for the opportunity to testify on this measure.



STATE OF HAWAII
DEPARTMENT OF EDUCATION
KA 'OIHANA HO'ONA'AUAO
P.O. BOX 2360
HONOLULU, HAWAII 96804

Date: 02/12/2025

Time: 10:00 AM

Location: 329 VIA VIDEOCONFERENCE

Committee: House Health

Department: Education

Person Testifying: Keith T. Hayashi, Superintendent of Education

Bill Title: HB 0903, HD1 RELATING TO STUDENT HEALTH.

Purpose of Bill: Authorizes a school to maintain a stock supply of bronchodilators to be administered under certain conditions. Authorizes certain employees of a school and department personnel to administer certain medication in emergency situations, under certain conditions. Amends prescription drug labeling requirements to include certain information related to a school, if applicable. Effective 7/1/3000. (HD1)

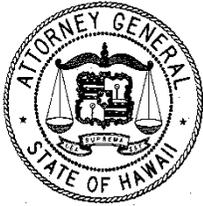
Department's Position:

The Hawai'i State Department of Education (Department) supports HB 903 HD1, which improves access to emergency medications in schools by authorizing trained personnel to administer life-saving treatments, including stock bronchodilators and a student's prescribed epinephrine, glucagon, and seizure rescue medications.

The Department also recognizes the substantial impact of asthma on student health and well-being, including its contribution to increased school absences and potential academic challenges. Therefore, the Department is aligned with the measure's goal to mitigate these disparities by enhancing access to emergency medication, particularly for students experiencing asthma attacks during school hours.

The Department remains committed to working collaboratively with the Department of Health and other stakeholders to protect student health while supporting equity in student achievement.

Thank you for the opportunity to provide testimony on this measure.



**TESTIMONY OF
THE DEPARTMENT OF THE ATTORNEY GENERAL
KA 'OIHANA O KA LOIO KUHINA
THIRTY-THIRD LEGISLATURE, 2025**

ON THE FOLLOWING MEASURE:

H.B. NO. 903, H.D. 1, RELATING TO STUDENT HEALTH.

BEFORE THE:

HOUSE COMMITTEE ON HEALTH

DATE: Wednesday, February 12, 2025 **TIME:** 10:00 a.m.

LOCATION: State Capitol, Room 329

TESTIFIER(S): Anne E. Lopez, Attorney General, or
Anne T. Horiuchi or Randall M. Wat, Deputy Attorneys General

Chair Takayama and Members of the Committee:

The Department of the Attorney General (Department) provides the following comments.

The bill: (1) authorizes a school to maintain a stock supply of bronchodilators to be administered under certain conditions; (2) authorizes certain employees of a school and department personnel to administer certain medication in emergency situations, under certain conditions; and (3) amends prescription drug labeling requirements to include certain information related to a school, if applicable. The bill also provides immunity to those acting in accordance with the requirements of the new law, except in cases of gross negligence.

The bill provides that the proposed section 302A-A(a), Hawaii Revised Statutes (HRS), would apply to a "school, as defined in section 302A-901" (page 1, lines 4-5), and the proposed section 302A-B would apply to "[e]mployees and agents of a school, as defined in section 302A-901" (page 3, lines 14-15). The definition of "school" in section 302A-901, HRS, includes "any day care center, childcare facility, headstart program, preschool, kindergarten, elementary, or secondary school, public or private, including any special school for children in the State." The Department of Education (DOE) does not have jurisdiction over all of the entities included in the definition of "school" under section 302A-901, HRS, including, for example, private schools and day care centers. As a result, the DOE would likely be unable to develop and implement the

protocol required under section 302A-A(b) (page 1, lines 10-17) for these entities. To address this issue, the Department suggests that it may be more appropriate if the DOE works on "guidelines" that could be followed by all the different entities included in the definition of "school." The Department suggests replacing references to the "protocol" with "guidelines" throughout the bill.

If the Committee chooses to retain this responsibility within the DOE, the Department suggests including the Hawaii State Public Charter School Commission (Commission) in the effort to develop the protocol. Charter schools are de-centralized, with facilities and staffing varying from charter school to charter school. The Commission is best positioned to provide information that would assist in the development of the protocol. We recommend revising proposed section 302A-A(b) on page 1, lines 10-17, as follows:

(b) The department shall develop ~~[a protocol]~~ **guidelines**, in collaboration with the **commission and the** department of health, regarding the maintenance and location of stock bronchodilators and spacers, the training of the school employees and agents in accordance with section 302A-B(d), parameters for the administration of the stock supply of bronchodilators, and contingencies for immediate and long-term follow-up to the administration of the medication, including making an emergency 911 call.

(Suggested changes Ramseyered against the text in the bill, and in bold.)

Thank you for the opportunity to provide comments on this bill.

Hawai'i Association of Professional Nurses (HAPN)



To: The Honorable Representative Gregg Takayama, Chair of the House Committee on Health

From: Hawai'i Association of Professional Nurses (HAPN)

Subject: HB903 HD1 – Relating to Student Health

Hearing: February 12, 2025, 10:00 a.m.

Aloha Representative Takayama, Chair; Representative Keohokapu-Lee Loy, Vice Chair; and Committee Members,

On behalf of the Hawai'i Association of Professional Nurses, we appreciate the opportunity to submit testimony in strong support of HB903 HD1, which authorizes schools to maintain a stock supply of bronchodilators and allows trained personnel to administer emergency medications under specific conditions. Additionally, this bill updates prescription drug labeling requirements to include school-related information where applicable.

Asthma is one of the most common chronic conditions affecting Hawai'i's keiki, and timely access to bronchodilators can be life-saving during an asthma episode. HB903 HD1 takes a critical step toward improving student health and safety through several key provisions:

1. **Stock Supply of Bronchodilators:** Schools will be authorized to maintain a supply of bronchodilators, ensuring that students experiencing asthma symptoms have immediate access to medication, even if they do not have their personal inhalers.
2. **Authorized Administration of Emergency Medication:** Trained school employees, health assistants, and designated personnel will be empowered to administer bronchodilators and other emergency medications, ensuring rapid and appropriate intervention during respiratory and other medical emergencies.
3. **Enhanced Safety Protocols:** The bill establishes clear protocols in collaboration with the Department of Education and the Department of Health. These protocols will address proper storage, training requirements, emergency response measures, and follow-up care to ensure the safety and well-being of students.
4. **Prescription Drug Labeling Updates:** The bill amends prescription drug labeling requirements to include school-specific information, ensuring compliance with legal standards and improving clarity when medications are prescribed for institutional use.

HB903 HD1 is a proactive measure that will strengthen school health services and foster a safer learning environment for all students. By ensuring rapid access to life-saving medications, this bill will help protect the health of Hawai'i's keiki and support the vital role of school staff in emergency situations.

HAPN remains committed to advancing access to quality healthcare and supporting policies that improve health outcomes for Hawai'i's communities. We appreciate the committee's consideration of this important measure and urge your support for HB903 HD1.

Mahalo for the opportunity to provide testimony.

Respectfully,

Dr. Jeremy Creekmore, APRN
HAPN President



**Testimony to the House Committee on Health
Wednesday, February 12, 2025; 10:00 a.m.
State Capitol, Conference Room 329
Via Videoconference**

RE: HOUSE BILL NO. 0903, HOUSE DRAFT 1, RELATING TO STUDENT HEALTH.

Chair Takayama, Vice Chair Keohokapu-Lee Loy, and Members of the Committee:

The Hawaii Primary Care Association (HPCA) is a 501(c)(3) organization established to advocate for, expand access to, and sustain high quality care through the statewide network of Community Health Centers throughout the State of Hawaii. The HPCA **SUPPORTS THE INTENT** of House Bill No. 0903, House Draft 1, RELATING TO STUDENT HEALTH.

By way of background, the HPCA represents Hawaii's Federally Qualified Health Centers (FQHCs). FQHCs provide desperately needed medical services at the frontlines to over 150,000 patients each year who live in rural and underserved communities. Long considered champions for creating a more sustainable, integrated, and wellness-oriented system of health, FQHCs provide a more efficient, more effective and more comprehensive system of healthcare.

The measure, as received by your Committee, would, among other things:

- (1) Allow a school to maintain a stock supply of bronchodilators, to be administered by a school health assistant or other authorized employee or agent who volunteers to administer to any student as needed for actual or perceived asthma episodes; and
- (2) Clarify the authority of school employees and volunteers to administer and store epinephrine, glucagon, seizure rescue medication, inhalers, and stock bronchodilators to a student in emergency situations.

This measure would take effect on July 1, 3000.

Testimony on House Bill No. 0903, House Draft 1
Wednesday, February 12, 2025; 10:00 a.m.
Page 2

The HPCA has long supported and will continue to support efforts to improve the safety of our schools and in fact have partnered with the Hawaii State Departments of Health and Education to provide training and direct medical services through COVID-19 related programs and school-based clinics. FQHCs have dispensed vaccinations to students, provided physical, dental, and mental health services, and at some campuses established "brick and mortar" facilities to provide essential health care to students and employees.

The HPCA has also partnered with other health care organizations such as the Epilepsy Foundation and the Diabetes Foundation to assist with the training for employees and volunteers to dispense and utilize essential diagnostic and emergency treatment devices and medications. We have also offered to work with all of the parties to develop strategies at the ground level to expedite the provision of often life-saving assistance to students or others who are in desperate need. To this end, the HPCA stands committed to continuing our offer to partner with all affected parties.

The issue of providing health care at schools is an enormous task that requires commitment from all of the parties to achieve these goals. There needs to be coordination between the Departments of Health, Education, and the Attorney General (at a minimum) to address all funding, personnel, and legal aspects. There needs to be a willingness between the State, the Hawaii State Teachers Association, and the United Public Workers to address essential training that falls within the purview of collective bargaining. There needs to be sufficient outreach to nonprofit health care and social service organizations to ensure their participation and commitment. And lastly, there needs to be engagement not just with students, but with their families and communities to adequately determine their specific necessities.

While we commend the introducer for this proposal, we realize that from a practical standpoint legislation alone will not fix the problem. Only true leadership that brings all of the parties to the table, along with mutual commitment to compromise would work. In our opinion, the only way this can be achieved would be for the Governor to utilize the power of the Office to bring all of these leaders to the table and facilitate meaningful concessions for the good of our keiki and communities.

Thank you for the opportunity to testify. Should you have any questions, please do not hesitate to contact Public Affairs and Policy Director Erik K. Abe at 536-8442, or eabe@hawaiiipca.net.



February 9, 2025

To: COMMITTEE ON HEALTH
Rep. Gregg Takayama, Chair
Rep. Sue L. Keohokapu-Lee Loy, Vice Chair

Re: SUPPORT OF HB903 HD1 RELATING TO STUDENT HEALTH

Hrg: Wednesday, February 12, 2025 at 10 AM

Aloha Takayama, Vice Chair Keohokapu-Lee Loy, and Members of the Committee,

The Hawai'i Public Health Association (HPHA) is a group of over 450 community members, public health professionals, and organizations statewide dedicated to improving public health.

HPHA submits this testimony in *strong support* of House Bill 903, House Draft 1. This bill, which enables Hawai'i schools to stock and administer albuterol for students experiencing respiratory distress, represents a crucial step forward in protecting the health and well-being of our keiki and promoting health equity across our communities. HPHA is a non-profit organization that champions policies and practices for a healthy Hawai'i. Our vision is to achieve health equity in Hawai'i and the Pacific region, alongside a robust public health workforce capable of effectively addressing health challenges.

Asthma is a significant public health concern, disproportionately affecting children and contributing to health disparities. According to the Hawai'i Department of Health's Data Warehouse, the prevalence of childhood asthma (9.4%) exceeds the national average, impacting over 30,000 children. Our unique environmental factors, including vog, allergens, and the presence of cockroaches, can exacerbate asthma symptoms, creating a heightened need for readily available emergency treatment.

HB 903 HD1 addresses a critical gap in our current system. By allowing schools to maintain a stock of albuterol and empowering trained school personnel, beyond registered nurses, to administer it, we can ensure that children experiencing respiratory distress receive immediate, potentially life-saving care. This proactive approach aligns directly with HPHA's core values of prevention, health equity, and community well-being.

Specifically, HPHA supports this bill for the following reasons:

- **Protects Student Health and Safety:** Asthma attacks can be life-threatening. Ensuring immediate access to albuterol in schools can prevent severe complications and save lives.
- **Promotes Health Equity:** This bill helps to address health disparities by ensuring that *all* children, regardless of their access to personal medication or proximity to a parent/guardian, have access to potentially life-saving treatment during school hours. This is particularly important for children from low-income families or those who may face barriers to consistent healthcare access.
- **Reduces Healthcare Costs:** By preventing severe asthma attacks and reducing the need for emergency room visits and ambulance transport, this bill can contribute to significant cost savings for families and the healthcare system as a whole.
- **Supports Educational Success:** Reducing asthma-related absences allows students to remain in the classroom, maximizing their learning opportunities and promoting academic achievement.
- **Evidence-Based Policy:** This bill aligns with best practices already adopted in over 20 other states, demonstrating its feasibility and effectiveness.



- **Comprehensive Training:** HPHA emphasizes the crucial importance of comprehensive training for designated school personnel. This training should cover asthma recognition, proper albuterol administration, and emergency protocols. We suggest the training include information about potential underlying causes in the student's environment.
- **Community Collaboration.** The HPHA would like to offer their services to collaborate with the Department of Education and the Department of Health to provide support and resources for such a valuable and life-saving initiative.

The Hawai'i Public Health Association strongly urges the committee to pass House Bill 903, House Draft 1. This legislation is a vital investment in the health, safety, and educational success of Hawai'i's children. It is a proactive, cost-effective, and equitable approach to addressing a significant public health challenge.

Thank you for the opportunity to provide testimony on this important issue.

Respectfully submitted,

Holly Kessler

Holly Kessler
Executive Director

TESTIMONY OF EVAN OUE ON BEHALF OF THE HAWAII ASSOCIATION FOR JUSTICE (HAJ) WITH COMMENTS ON HB 903

Date: Tuesday February 11, 2025

Time: 10:00 a.m.

My name is Evan Oue and I am presenting this testimony on behalf of the Hawaii Association for Justice (HAJ) with **COMMENTS** on HB 903, Relating to Student Health.

While HAJ appreciates the intent of the measure, we have **serious concerns with HB 903** in its current form as it grants immunity from any civil damages arising from administration of a bronchodilator in an emergency situation by a school employee or agent.

Specifically, section 302A-B (h) states "Any school or person, including the health professionals providing training to volunteers subject to this section, the prescribing physician, physician assistant, advanced practice registered nurse, or other practitioner with prescriptive authority, and the pharmacist or pharmacy dispensing the prescription, who acts in accordance with the requirements of this section shall be immune from any civil or criminal liability arising from these acts, except where the person's conduct would constitute gross negligence, willful and wanton misconduct, or intentional misconduct."

HAJ understands the need for requiring schools to have an employee trained to administer a bronchodilator to ensure student safety. However, designated school employees, agents or trained physicians should not be granted complete immunity from civil liability for administration of seizure medication. The standard of care for our vulnerable students should be upheld. When a school employee is rendering aid, the applicable standard would be similar to Hawaii's good Samaritan statutes which provides for immunity "unless the person's acts constitute gross negligence or wanton acts or omissions." HRS § 663-1.6.

Further, “any person who in good faith renders emergency care, without remuneration or expectation of remuneration, at the scene of an accident or emergency to a victim of the accident or emergency shall not be liable for any civil damages resulting from the person's acts or omissions, **except for such damages as may result from the person's gross negligence or wanton acts or omissions.**” HRS. § 663-1.5.

Therefore, at the very least school employees who render aid under this bill should be immune from liability unless their acts constitute gross negligence or wanton acts. Furthermore, schools owe their students a duty of reasonable care in ensuring each student’s safety. *See Doe Parents No. 1 v. State, Dep’t of Educ.* Courts have held that the DOE shares a “special relationship”—*i.e.*, a quasi-parental or *in loco parentis* custodial relationship—with its students, which obligates the DOE to exert reasonable care in ensuring each student's safety and welfare, as would a reasonably prudent parent.

In other words, the DOE owes its students the duty to take whatever precautions are reasonable to prevent harms that it anticipates, or reasonably should anticipate. Schools owe their students a duty of reasonable care in ensuring each student’s safety, this should include when rendering aid. Exempting public schools from all liability in connection with administering a bronchodilator is not in line with Hawai’i Supreme Court precedent nor Hawai’i’s current Good Samaritan law.

HAJ respectfully requests that subsection (h) on page 11, lines 3-12 be deleted to remove the civil liability limitations for school employees and prescribing positions to preserve the rights of our students.

Alternatively, we recommend amending the statute as follows: “Any person who acts in accordance with the requirements of this section shall not be liable in civil damages unless the person's acts constitute negligence, gross negligence or wanton acts or omissions, or unless the

person receives or expects to receive remuneration. Nothing contained in this subsection shall alter existing law with respect to tort liability of a physician licensed to practice under the laws of this State committed in the ordinary course of the physician's practice.”

Thank you for allowing us to testify regarding this measure. Please feel free to contact us should you have any questions or desire additional information.



**Testimony Presented Before the
House Committee on Health
Wednesday, February 12, 2025 at 10:00 AM
Conference Room 329 and videoconference
by
Laura Reichhardt, APRN, AGPCNP-BC
Director, Hawai'i State Center for Nursing
University of Hawai'i at Mānoa**

TESTIMONY IN STRONG SUPPORT on H.B. 903, H.D. 1

Chair Takayama, Vice Chair Keohokapu-Lee Loy, and members of the committee:

Thank you for hearing this measure. This measure aims to authorize schools to maintain a supply of bronchodilators to be administered under certain conditions, authorizes employees to administer the bronchodilator for emergency situations, and creates a process that enables prescriptions for a bronchodilator to be written to schools. In addition, this measure clarifies the statutes related to medication administration in schools. The Hawai'i State Center for Nursing (HSCN) is in strong support of this measure.

HSCN has a longstanding initiative to address barriers to Advanced Practice Registered Nurse (APRN) care as a mechanism to improve access to high quality health care services. In 2022, HSCN started an interprofessional effort to review the Hawai'i Revised Statutes (HRS) for laws that inform healthcare access that are outside of healthcare professionals' scope of practice laws (primarily in Title 25). The committee found that nearly half of the HRS had language that limited all qualified providers from engaging in certain healthcare activities as described in those statutes. This measure is a good example of including all eligible healthcare providers that may contribute to the process. The outcome is that local healthcare provided, whether it be the associated Hawai'i Keiki school APRN, or other provider can engage in the prescribing of this medication to the school.

Further, it improves the clarity of the process both for emergency administration of medication by volunteer and self-administration of medication by a student. This will increase access to appropriate health interventions for emergencies and management of known health conditions for children while at school. This is a strong health policy intervention that improves access to appropriate and safe health care in the community.

The Hawai'i State Center for Nursing commends the Legislature for introducing this measure and for your commitment to the health and safety of children in our state. Thank you for the opportunity to testify in support of this measure.

The mission of the Hawai'i State Center is to engage in nursing workforce research, promote best practices and disseminate knowledge, cultivate a diverse and well-prepared workforce, support healthy work environments, champion lifelong learning, and strategically plan for sound nursing workforce policy.

To: Representative Gregg Takayama, Chair
Representative Sue L. Keohokapu-Lee Loy, Vice Chair
House Committee on Health

From: Chevelle Davis, Director of Early Childhood & Health Policy
Hawai'i Children's Action Network Speaks!

Subject: Measure H.B. No. 903 H.D. 1 – Relating to Student Health

Hearing: Wednesday, February 12, 2025, at 10:00 AM, Conference Room 329

POSITION: Support

Aloha e Chair Takayama, Vice Chair Keohokapu-Lee Loy, and Members of the Committee,

Mahalo for the opportunity to provide testimony **supporting H.B. No. 903 H.D. 1**, which allows schools in Hawai'i to stock life-saving medication for students with asthma or respiratory distress.

Asthma is a significant concern for children in Hawai'i, made worse by unique factors like cockroaches, VOG, and allergens. Without immediate treatment, asthma attacks can escalate, endangering lives and leading to costly emergency care.

Stocking medication or bronchodilators in schools offers a simple, affordable solution. This medication is safe, easy to administer, and critical for reversing airway blockages during an attack. Without it, children without their medication – whether due to forgetfulness or affordability – leave schools reliant on emergency services, risking delays that could have severe consequences.

Equipping schools with stock inhalers and training staff to recognize and respond to asthma symptoms ensures timely care, especially as not all schools have nurses. Similar policies in 15 other states have proven effective.

Passing **H.B. No. 903 H.D. 1** is vital to protecting our keiki's health and safety.

Testimony Presented Before the

House Committee on Health

HEARING: Wednesday February 12, 2025, 10:00 A.M.

PLACE: Room 329 State Capital and via videoconference



Hawai'i – American Nurses Association (Hawai'i-ANA)

HB903, HD1 – Relating to Student Health

Chair Gregg Takayama, ViceChair Sue L. Keohokapu-Lee Loy and members of the House Committee on Health, thank you for providing this opportunity for Hawai'i - American Nurses Association (Hawai'i-ANA) to provide testimony **in strong support of HB903, HD1.**

Hawai'i-American Nurses Association (Hawai'i- ANA) is the professional association for over 17,000 registered nurses who live and work in Hawai'i. Our mission is to advocate for the improvement of the healthcare system in the communities where we live and work.

HB903, HD1 would authorize schools to maintain a supply of bronchodilators to be administered under certain conditions, authorizes employees/volunteers to administer the bronchodilator for emergency situations, and creates a process that enables prescriptions for a bronchodilator to be written to schools. In addition, this measure clarifies the process both for emergency administration of medication by a volunteer and self-administration of medication by a student. This measure will increase access to

appropriate health interventions for emergencies and management of known health conditions for children while at school. This is a strong health policy intervention that improves access to appropriate and safe health care in the community.

Hawai'i-ANA commends the legislature for introducing this measure and for your commitment to the health and safety of children in our state. Thank you for the opportunity to testify in support of this measure.

Contact information for Hawai'i – American Nurses Association:

President: Dr. Denise Cohen, PhD, APRN, FNP-BC, president@hawaii-ana.org

Executive Director: Elizabeth M. Kahakua, BSN executivedirector@hawaii-ana.org
phone (808) 779-3001 500 Lunalilo Home Road, #27-E, Honolulu HI 96825



To: The Honorable Gregg Takayama, Chair
The Honorable Sue L. Keohokapu-Loy, Vice Chair
House Committee on Health

From: Paula Arcena, External Affairs Vice President
Mike Nguyen, Public Policy Manager
Sarielyn Curtis, External Affairs Specialist

Hearing: Wednesday, February 12, 2025, 10:00 a.m., Conference Room 329

RE: **HB903 HD1 Relating to Student Health**

AlohaCare appreciates the opportunity to provide testimony in **support of HB903 HD1**. This measure authorizes a school to maintain a stock supply of bronchodilators to be administered under certain conditions and authorizes employees of a school and department personnel to administer certain medication in emergency situations, under certain conditions. It amends prescription drug labeling requirements to include certain information related to a school, if applicable.

Founded in 1994 by Hawai'i's community health centers, AlohaCare is a community-rooted, non-profit health plan serving over 70,000 Medicaid and dual-eligible health plan members on all islands. Approximately 37 percent of our members are keiki. We are Hawai'i's only health plan exclusively dedicated to serving Medicaid and Medicaid-Medicare dually-eligible beneficiaries. Our mission is to serve individuals and communities in the true spirit of aloha by ensuring and advocating for access to quality, whole-person care for all.

Asthma impacts millions of lives and has a tremendous impact on our nation's healthcare system and economy. In the U.S., over 26 million Americans have asthma, including 4.5 million children.ⁱ In Hawai'i, 21,411 children have asthmaⁱⁱ, which can be made worse due to our environmental factors, such as cockroaches, vog, and allergies.

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.

Current Hawai'i law, HRS 302A-1164, already allows schools to administer certain medications for emergency use; epinephrine (epi-pen) is one common example.



ALOHACARE

It is critical that school staff are trained in the signs and symptoms of asthma and know when it is appropriate to administer rescue medications. Currently school nurses are the only school personnel trained to care for our keiki with asthma, but unfortunately not all schools have a keiki school nurse present. Because of the safety of the medication used and the life-threatening implications of an asthma attack, it is imperative that we train other staff to assess, access, and administer the required medication that would potentially save a student's life.

Mahalo for this opportunity to testify in **support of HB903 HD1.**

ⁱ CDC. 2022 National Health Interview Survey.

ⁱⁱ CDC. 2019 Behavioral Risk Factor Surveillance System.



COMMITTEE ON HEALTH

Rep. Gregg Takayama, Chair

Rep. Sue L. Keohokapu-Loy, Vice Chair

Wednesday, February 12, 2025, 10:00 AM – Conference Room 309

**Testimony in Support of House Bill 1448 House Draft 1
Relating to Asthma**

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. The work of the American Lung Association in Hawaii and across the nation is focused on four strategic imperatives: to defeat lung cancer; to improve the air we breathe; to reduce the burden of lung disease on individuals and their families; and to eliminate tobacco use and tobacco-related diseases.

The American Lung Association strongly supports House Bill 903, House Draft 1, relating to student health. The bill would authorize the department of education to stock bronchodilators for emergency use during respiratory distress and authorize department employees to volunteer to administer bronchodilators.

Asthma is a serious public health concern in Hawai‘i. In 2022, 9.4% of Hawai‘i children were estimated to have asthma compared to less than 7% of children in the U.S. as a whole.¹ In Hawai‘i, disparities in asthma prevalence are seen in race/ethnicity and region, with Native Hawaiians being disproportionately affected by asthma and experiencing the greatest burden. Native Hawaiians have the highest asthma prevalence at 28.3% compared to Caucasians (17.1%), Chinese (16.4%), Filipino (20.5%), Japanese (17.7%), or other races/ethnicities (19.8%).² Areas with high asthma prevalence include Hawai‘i and Maui counties and the Nānākuli/Wai‘anae sub-county areas on O‘ahu. Asthma disparities can be further exacerbated by geographic isolation, lack of transportation to and from doctor’s appointments, lower socioeconomic status, and limited access to healthcare specialists and subspecialists.

Absenteeism due to poorly controlled asthma may negatively affect educational outcomes and limit students with asthma’s ability to fully participate in school activities, and when children miss school, a parent or guardian often misses work to care for them. Addressing asthma effectively requires a coordinated effort among school staff, home/family members, and the primary care physician to improve health outcomes for children with asthma.

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.

While there is a system in place to help children who have diagnosed asthma by allowing children to bring their own asthma inhalers and either keep them at school or carry with them, unfortunately we cannot expect that all children with asthma will have their inhalers on them. When children do not have asthma medication, which can occur for a variety of reasons such as forgetting it or not being able to

¹ Behavioral Risk Factor Surveillance Survey, 2011-2022. Analysis by the American Lung Association Epidemiology and Statistics Unit using SPSS software.

² Uchima O, Taira DA, Ahn HJ, Choi SY, Okihiro M, Sentell T. Disparities in Potentially Preventable Emergency Department Visits for Children with Asthma among Asian Americans, Pacific Islanders, and Whites in Hawai‘i. International Journal of Environmental Research and Public Health. 2021

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.

Studies have demonstrated the effectiveness of school-based stock inhaler programs in mitigating respiratory emergencies. Research published in the *Annals of the American Thoracic Society* indicates that these programs can lead to a 20% reduction in 9-1-1 calls and a 40% decrease in Emergency Medical Services (EMS) transports for respiratory distress.³

Furthermore, research conducted in Arizona, Illinois, and Missouri (*Journal of Allergy, Asthma, and Immunology*, 2021) has shown that approximately 80% of children experiencing an asthma attack can return to class after receiving albuterol from a school-based stock inhaler. This research also highlights that 84% of students were able to resume their academic activities following the administration of the stock inhaler.⁴

Therefore, the availability of a stock inhaler enables a swift response to asthma emergencies, allowing children to remain in their learning environment. In the absence of a stock inhaler, schools would be required to contact a parent to bring the child's medication or to call 9-1-1. This delay in treatment can significantly exacerbate respiratory distress.

Currently, Keiki Nurses are able to carry stock albuterol and administer to children. However, there are not enough keiki nurses to be available in every school. Even if they were in every school, it's impossible for them to keep watch on every sports practice, marching band practice, or PE class where children may more likely experience respiratory distress. 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.

HB 903 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.

HB 903 represents a simple and low-cost solution to a problem that could save both lives and money. In total, [24 states](#) have passed legislation or have administrative guidelines in place allowing schools to stock asthma medications. However, there are key provisions that should be included in this legislation to ensure it will be as effective as possible. These include:

- Making sure the legislation applies to all public and nonpublic schools.

³ Lynn B. Gerald, Aimee Snyder, Jody Disney, Joe K Gerald, Allison Thomas, Graciela Wilcox, & Mark Brown. (2016). "Implementation and Evaluation of a Stock Albuterol Program for Students with Asthma." *Annals of the American Thoracic Society*. 13(2): 295. <https://pubmed.ncbi.nlm.nih.gov/26848605/>

⁴ Gerald, Joe K., Nancy Stroupe*, Leslie A. McClure, Lani Wheeler, & Lynn B. Gerald. (2012). "Availability of Asthma Quick Relief Medication in Five Alabama School Systems." *Journal of Pediatric Asthma, Allergy, and Immunology*. 25(1):11-16.

- Applying the legislation to both students who have been diagnosed with asthma and students suffering from respiratory distress that may not have been diagnosed yet.
- Ensuring that school staff other than school health officials are required to be properly trained in the proper use and administration of the stock asthma medication.
- Making certain that all school staff, officials or health care providers involved in administration or prescribing of stock asthma medication receive liability protection except in cases of willful or gross negligence.

The Lung Association strongly supports HB 903 House Draft 1 and supports swift action to move the bill out of committee.

With gratitude,

Pedro Haro
Executive Director
American Lung Association in Hawai'i
pedro.haro@lung.org

TO: House Committee on Health
Representative Gregg Takayama, Chair
Representative Sue L. Keohokapu-Lee Loy, Vice Chair

DATE: Wednesday, February 12, 2025
TIME: 10:00 AM
PLACE: Via Videoconference
Conference Room 329

TESTIMONY IN SUPPORT OF HB 903 HD1, RELATING TO STUDENT HEALTH

Dear Chair Takayama, Vice Chair Keohokapu-Lee Loy, and Members of the Committee,

My name is Dr. Cynthia J. Goto, and I am writing to express my support for House Bill 903 HD1, relating to student health. This bill will allow schools in Hawaii to provide more immediate access to medications for students with asthma or suffering from respiratory distress.

Asthma is one of the most common chronic childhood diseases in Hawaii. In Hawaii, 21,411 children have asthma¹, and this bill has the potential to save lives and keep kids safe at school.

According to the Centers for Disease Control and Prevention (CDC), on average, in a classroom of 30 children, about 3 are likely to have asthma. Low-income populations, Native Hawaiians, and children living near traffic intersections experience more emergency department visits, hospitalizations, and deaths due to asthma than the general population.

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 cost 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 use a single inhaler containing a short-acting bronchodilator along with inexpensive disposable 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.

Please support House Bill 903 HD1 to ensure that our children with asthma have access to safe and effective medication which could potentially save a student's life.

Thank you for the opportunity to testify.

Cynthia J. Goto, M.D.

¹ CDC. 2019 National Health Interview Survey.

COMMITTEE ON HEALTH

Rep. Gregg Takayama, Chair

Rep. Sue L. Keohokapu-Lee Loy, Vice Chair

Wednesday, February 12, 2025 – 10:00 pm, Conference Room 329

Testimony in Support of House Bill 903 House Draft 1 Relating to Student Health

Chair Takayama, Vice Keohokapu-Lee Loy, and Members of the Committee:

Thank you for the opportunity to provide comments on House Bill 903, House Draft 1, which makes it possible for schools in Hawai'i to provide more immediate access to medication for students with asthma or suffering from respiratory distress. Asthma can be a deadly disease if flare-ups are not treated immediately.

Stocking albuterol in schools has the potential to save lives and keep kids safe in schools. Albuterol inhalers, the medication in question, are much more safe and effective than popular, non-prescription, over-the-counter inhalers like Primatine Mist, and Asthmanefrin.

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.

Children often do not have asthma medication for a variety of reasons such as forgetting it or not being able to afford it, poor access to health care; thus, schools have few options. A parent may not be immediately accessible. An asthma exacerbation often gets worse. In such cases, the school must call 911. Doing so is likely to lead to an ambulance transport cost and emergency department visit costing thousands more. Such events also take children out of the classroom for days at a time.

These adverse events are largely avoidable with a simple low-cost solution: stock medication or inhalers. Schools can use a single inhaler containing a short-acting bronchodilator along with inexpensive disposable 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.

This bill is a strong first step for our schools to adopt policies already adopted in over 20 other states across the nation. I urge you to please pass House Bill 903, House Draft 1. Anyone who opposes this bill needs to see a child in distress from asthma, it will change their mind

Sincerely,

Dr. Ron Sanderson, RRT, RPFT
Certified Asthma Educator
National Faculty for Asthma Educator Training
American Lung Association of Hawaii , Program Committee

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Honolulu, Hawaii 96825

HB-903-HD-1

Submitted on: 2/10/2025 1:37:17 PM

Testimony for HLT on 2/12/2025 10:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Tina Wildberger	Individual	Support	Written Testimony Only

Comments:

Aloha Chair, Vice Chair & Committee Members,

Thank you for your important work on this measure. Testifying in strong support for HB903. Having medication for asthma sufferers at schools will ensure students can stay in class. It can abate emergency trips to the hospital.

Albuterol, a bronchodilator, is a safe medication. Schools already stock meds for diabetes and anaphylaxis, both of which have greater consequences if administered incorrectly. Adding Albuterol to the list of available treatments for students at schools just makes sense.

According to data from the Hawai‘i State Department of Health, around 10% of children in Hawai‘i currently have asthma, with the highest prevalence among Native Hawaiian children, where the rate is significantly higher compared to other ethnicities in the state. That’s 30,000 students across the state.

Please pass this measure now that DoE is on-board. It’s a small investment in addressing students’ health concerns and it keeps them in class.