

LEGISLATIVE BUDGET BOARD
Austin, Texas

FISCAL NOTE, 84TH LEGISLATIVE REGULAR SESSION

April 13, 2015

TO: Honorable Jimmie Don Aycock, Chair, House Committee on Public Education

FROM: Ursula Parks, Director, Legislative Budget Board

IN RE: HB2847 by Crowover (Relating to policies and training regarding the use of epinephrine auto-injectors by school districts and open-enrollment charter schools; providing immunity.), **As Introduced**

<p>No significant fiscal implication to the State is anticipated.</p>
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The bill would require the Commissioner of State Health Services to establish an advisory committee on the use of epinephrine auto-injectors on a person experiencing an anaphylactic reaction on a campus or at or in transit to or from an off-campus school event.

The bill would allow school districts and open-enrollment charter schools to adopt and implement policies for the possession, administration, and disposal of epinephrine auto-injectors.

The bill would require the Commissioner of Education and Commissioner of State Health Services to adopt rules regarding the maintenance, administration, and disposal of epinephrine auto-injectors, including the number of epinephrine auto-injectors required to be available at each campus that had adopted a policy on epinephrine auto-injectors. Only districts that had chosen to adopt an epinephrine auto-injector policy would be required to abide by commissioner rules related to epinephrine auto-injectors.

The bill would require school districts and open-enrollment charter schools to report to the Commissioner of Education and the Commissioner of State Health Services the administration of an epinephrine auto-injector.

Based on the analysis of the Texas Education Agency (TEA) and the Department of State Health Services (DSHS), the duties and responsibilities associated with implementing the provisions of the bill could be accomplished by utilizing existing resources.

Local Government Impact

To the extent that the Commissioner of Education and the Commissioner of State Health Services adopt rules requiring districts to maintain epinephrine auto-injectors, local school districts and open enrollment charter schools that chose to adopt a policy regarding epinephrine auto-injectors would be required to stock epinephrine auto-injectors and train employees in their use.

Costs to local school districts would vary based on how many districts chose to adopt a policy

regarding epinephrine auto-injectors. DSHS reports that campuses that have adopted a policy regarding epinephrine auto-injectors would need to maintain a supply of epinephrine auto-injectors in two strengths, 0.15mg and 0.30mg. Due to the short shelf life, unused epinephrine auto-injectors would need to be replaced annually. TEA and DSHS estimate that epinephrine auto-injectors would cost \$110 to \$450 per pack. Additionally, at least one employee on each campus subject to the policy would be required to undergo annual training related to anaphylaxis and epinephrine auto-injectors. TEA estimates the cost of such training at \$20. To the extent that schools are able to access free training, and to the extent that schools could replace expired epinephrine auto-injectors at no cost, costs may be lower. These costs would be voluntary.

School districts and open-enrollment charter schools could accept gifts, donations, grants, and federal and local funds to defray some of the costs for implementing the program.

Source Agencies: 537 State Health Services, Department of, 701 Central Education Agency

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