



Ohio Legislative Service Commission

Edward M. Millane

Fiscal Note & Local Impact Statement

Bill: [H.B. 296 of the 130th G.A.](#)

Date: November 6, 2013

Status: As Introduced

Sponsor: Reps. Johnson and Duffey

Local Impact Statement Procedure Required: No

Contents: Authorizes public schools to procure epinephrine autoinjectors and exempts them from certain licensing requirements related to the possession of epinephrine autoinjectors

State Fiscal Highlights

- The State Board of Pharmacy may experience a minimal decrease in revenue due to issuing fewer terminal distributor of dangerous drugs licenses, since the bill permits schools to possess and administer epinephrine autoinjectors without the license. The fee for this license is \$112.50.

Local Fiscal Highlights

- Public schools may experience a decrease in expenditures, since the bill permits schools to possess and administer epinephrine autoinjectors without a terminal distributor of dangerous drugs license. The fee for this license is \$112.50.
- Schools that choose to procure and maintain a supply of epinephrine autoinjectors may incur costs in developing a policy regarding the use and maintenance of the drug, reporting certain items to the Ohio Department of Education (ODE), and purchasing the autoinjectors. The bill permits manufacturers of dangerous drugs to donate epinephrine autoinjectors to participating schools. If manufacturers do so, costs for schools will be lower.

Detailed Fiscal Analysis

Currently, schools may possess epinephrine autoinjectors by obtaining a terminal distributor of dangerous drugs license from the State Board of Pharmacy and a protocol or standing order from a licensed physician authorizing certain individuals to administer the drug under specified circumstances.¹ The bill authorizes all public schools (school districts, community schools, STEM schools, and college-preparatory schools) to procure epinephrine autoinjectors without a license and to maintain a supply of the drug for use in specified emergency situations. Schools that choose to procure the autoinjectors must adopt a policy regarding their maintenance and use. The policy must contain a prescriber-issued protocol, approved by the State Board of Pharmacy, and specify seven conditions, including: (1) identifying a location or locations in the school where the injectors are to be stored, (2) specifying any training that designated employees must complete, and (3) specifying the individuals, in addition to students, school employees, and school visitors, who may receive a dosage of epinephrine in specified emergency conditions.

A school that voluntarily chooses to procure and maintain a supply of epinephrine autoinjectors under the bill will incur costs related to developing and implementing the policy, specifically in working with a licensed physician and providing training to employees. These costs are not likely to be significantly different from the costs incurred by schools that choose to possess and administer the drug under current law. Under the bill, however, schools will not be required to obtain a terminal distributor of dangerous drugs license. The fee for this license is \$112.50.² This represents a savings for the school and a loss of revenue for the Board of Pharmacy.

After establishing a policy that complies with the bill, a school may purchase epinephrine autoinjectors for its emergency supply. Most autoinjectors are dispensed in packs of two with a cost of approximately \$200 per pack. Schools may choose to stock more than one pack of autoinjectors at a time. For example, the Chicago Public School District, in meeting Illinois' statute, stocks from four to six autoinjectors at a time in each building.³ Autoinjectors typically expire and need to be replaced after 12 to 16 months, so these purchase costs will be recurring. The bill permits manufacturers of dangerous drugs to donate epinephrine autoinjectors to participating schools. If manufacturers do so, costs for schools will be lower.

¹ An analysis conducted by the State Board of Pharmacy in July 2012 showed more than 20 public schools had terminal distributor of dangerous drugs licenses issued by the Board.

² R.C. 4729.54(G)(1)(b).

³ http://articles.chicagotribune.com/2012-01-23/news/ct-met-cps-epi-pen-20120123_1_cps-asthma-management-katelyn-carlson.

Participating schools must also report to the Department of Education (ODE) each acquisition of epinephrine autoinjectors and each occurrence in which one is used from its supply. Schools may incur increased expenditures for complying with this requirement, although any increase will likely be negligible.

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