HOUSE COMMITTEE ON APPROPRIATIONS

FISCAL NOTE

HOUSE BILL NO. 126 **PRINTERS NO**. 4072 **PRIME SPONSOR**: Warner

COST / (SAVINGS)

FUND	FY 2018/19	FY 2019/20
General Fund	**$0**	**$0**

SUMMARY: House Bill 126, Printer's Number 4072, amends Title 35 (Health and Safety) to provide additional exceptions to prescribing opioids to minors, add Chapter 54, Cancer Trial Access for Pennsylvania Patients, and add Chapter 55, Epinephrine Auto-Injectors for Authorized Entities. Chapter 54 is effective in 6 months and Chapter 55 is effective in 60 days.

ANALYSIS: This legislation adds exceptions to prescribing opioids to minors when the medical treatment is provided while the minor remains admitted to a licensed health care facility or remains in observation status or if the prescriber is continuing a treatment initiated by another member of the prescriber's practice and is not changing the therapy in any way other than dosage.

Chapter 54, Cancer Clinical Trial Access for Pennsylvania Patients, should increase access to clinical trials for PA patients who might not participate in the study due to limited financial means. This legislation will allow Third-Party Reimbursement Entities that have registered with a Department of Health (DOH)-approved PA college or university to reimburse patients and their family, friends or chaperones for the cost of travel, ancillary medical costs and other direct patient-incurred expenses related to clinical trial participation.

All sponsors of cancer clinical trials must inform potential patients-subjects at the time of informed consent of the availability of reimbursement for travel and ancillary expenses based on financial need to eliminate financial barriers to enrollment. Reimbursement for these expenses shall not be considered an inducement, coercive or exerting undue influence to participation in a clinical trial.

Chapter 55, Epinephrine Auto-Injectors for Authorized Entities, permits an "authorized entity" to maintain a supply of epinephrine auto-injectors (EAIs) and to authorize a properly trained employee to provide an EAI to a person for self-administration, or for that employee to administer the injection to a person, including in an emergency situation, when the employee, in good faith, believes the person is having an anaphylactic reaction.

An "authorized entity" is defined as an entity or organization at which allergens capable of causing anaphylaxis may be present, including but not limited to:

- Recreation camps
- Colleges and universities

- Day-care facilities
- Youth sports leagues
- Amusement parks
- Restaurants
- Places of employment
- Sports arenas
- Law enforcement agencies

Health care practitioners may prescribe, and pharmacists and health care practitioners may dispense, EAIs in the name of authorized entities, to be maintained for use. Authorized entities may acquire and stock a supply of EAIs pursuant to a prescription. The EAIs shall be stored in a location readily accessible in an emergency and in accordance with the EAI's instructions for use. Individuals responsible for the storage, maintenance and general oversight of the EAIs acquired by the entity are required to complete a training program.

Upon successful completion of a training program, an employee of an authorized entity is permitted to:

- Provide an EAI to any person, or to the person's parent or guardian, who the employee believes, in good faith, is experiencing anaphylaxis, for immediate administration, regardless of whether the person has a prescription for an EAI or has previously been diagnosed with an allergy; and
- Administer an EAI to any person who the employee believes, in good faith, is experiencing anaphylaxis, for immediate administration, regardless of whether the person has a prescription for an EAI or has previously been diagnosed with an allergy.

An employee of an authorized entity is required to complete an anaphylaxis training program as required by the Department of Health (DOH). This training will be conducted by a nationally recognized organization experienced in training laypersons in emergency health treatment, a health care practitioner employed or contracted by the authorized entity, or an entity approved by DOH.

Training may be conducted online or in person and, at a minimum, will cover:

- How to recognize signs and symptoms of severe allergic reactions, including anaphylaxis;
- Standards and procedures for the storage and administration of an EAI;
- Emergency follow-up procedures.

The entity that conducts the training will be required to issue a certification, on a form developed or approved by DOH, to each individual who successfully completes the training program.

The following will not be liable for any injuries or related damages that result from any act or omission taken pursuant to this act:

- An authorized entity that possesses and makes available EAIs and its employees;
- A health care practitioner that prescribes and dispenses, and a pharmacist that dispenses, EAIs to an authorized entity;
- An individual or entity that conducts the training program.
- The immunity provided will not apply to acts or omission constituting intentional misconduct or gross negligence.

The provisions of Title 42 § 8332 (relating to emergency response provider and bystander Good Samaritan civil immunity) apply to individuals who administer an EAI.

FISCAL IMPACT: According to the Department of Health, enactment of this legislation will have no fiscal impact on Commonwealth funds.

PREPARED BY: Ann Bertolino
House Appropriations Committee (R)

DATE: September 25, 2018

Estimates are calculated using the best information available. Actual costs and revenue impact incurred may vary from estimates.