

ALASKA STATE LEGISLATURE
HOUSE HEALTH, EDUCATION AND SOCIAL SERVICES STANDING COMMITTEE

February 15, 2005

3:05 p.m.

MEMBERS PRESENT

Representative Peggy Wilson, Chair
Representative Paul Seaton, Vice Chair
Representative Lesil McGuire
Representative Sharon Cissna
Representative Berta Gardner
Representative Tom Anderson

MEMBERS ABSENT

Representative Vic Kohring

OTHER LEGISLATORS PRESENT

Representative Mark Neuman
Representative Carl Gatto

COMMITTEE CALENDAR

CS FOR HOUSE BILL NO. 1(EDU)

"An Act relating to the base student allocation used in the formula for state funding of public education; and providing for an effective date."

- MOVED CSHB 1(HES) OUT OF COMMITTEE

CS FOR HOUSE BILL NO. 30(EDU)

"An Act making appropriations for K-12 education operating and school debt expenses; and providing for an effective date."

- MOVED CSHB 30(HES) OUT OF COMMITTEE

HOUSE BILL NO. 85

"An Act relating to self-administration and documentation of certain types of medication prescribed to a child attending school."

- MOVED CSHB 85(HES) OUT OF COMMITTEE

PREVIOUS COMMITTEE ACTION

BILL: HB 1

SHORT TITLE: INCREASE AMT OF BASE STUDENT ALLOCATION

SPONSOR(S): REPRESENTATIVE(S) GATTO

01/10/05 (H) PREFILE RELEASED 12/30/04
01/10/05 (H) READ THE FIRST TIME - REFERRALS
01/10/05 (H) EDU, HES, FIN
01/27/05 (H) EDU AT 11:00 AM CAPITOL 106
01/27/05 (H) Heard & Held
01/27/05 (H) MINUTE(EDU)
02/08/05 (H) EDU AT 11:00 AM CAPITOL 106
02/08/05 (H) Heard & Held
02/08/05 (H) MINUTE(EDU)
02/10/05 (H) EDU AT 11:00 AM CAPITOL 106
02/10/05 (H) Moved CSHB 1(EDU) Out of Committee
02/10/05 (H) MINUTE(EDU)
02/14/05 (H) EDU RPT CS(EDU) 2DP 5NR
02/14/05 (H) DP: GATTO, NEUMAN;
02/14/05 (H) NR: GARA, SALMON, WILSON, THOMAS, LYNN
02/15/05 (H) HES AT 3:00 PM CAPITOL 106

BILL: HB 30

SHORT TITLE: APPROP: K-12 EDU OPERATING/DEBT EXPENSES

SPONSOR(S): REPRESENTATIVE(S) HARRIS

01/10/05 (H) PREFILE RELEASED 12/30/04
01/10/05 (H) READ THE FIRST TIME - REFERRALS
01/10/05 (H) EDU, HES, FIN
02/03/05 (H) EDU AT 11:00 AM CAPITOL 106
02/03/05 (H) Heard & Held
02/03/05 (H) MINUTE(EDU)
02/08/05 (H) EDU AT 11:00 AM CAPITOL 106
02/08/05 (H) Heard & Held
02/08/05 (H) MINUTE(EDU)
02/10/05 (H) EDU AT 11:00 AM CAPITOL 106
02/10/05 (H) Moved CSHB 30(EDU) Out of Committee
02/10/05 (H) MINUTE(EDU)
02/11/05 (H) EDU RPT CS(EDU) 2DP 5NR
02/11/05 (H) DP: GATTO, NEUMAN;
02/11/05 (H) NR: GARA, SALMON, WILSON, LYNN, THOMAS
02/14/05 (H) CORRECTED CS(EDU) RECEIVED
02/15/05 (H) HES AT 3:00 PM CAPITOL 106

BILL: HB 85

SHORT TITLE: PRESCRIBED MEDICATION FOR STUDENTS

SPONSOR(S): REPRESENTATIVE(S) MEYER

01/19/05 (H) READ THE FIRST TIME - REFERRALS
01/19/05 (H) HES, JUD
02/15/05 (H) HES AT 3:00 PM CAPITOL 106

WITNESS REGISTER

JENNIE HAMMOND
Nikiski, Alaska
POSITION STATEMENT: Testified in support of increased education funding.

KATIE MANDLEDORF
Palmer, Alaska
POSITION STATEMENT: Testified in support of increased education funding.

ANNE KILKENNY
Wasilla, Alaska
POSITION STATEMENT: Testified in support of increased education funding.

LAUGHTON ELLIOTT
Juneau, Alaska
POSITION STATEMENT: Testified in support of increased education funding.

DOROTHEA ADAMS, President
Yukon Flats School Board
Beaver, Alaska
POSITION STATEMENT: Testified in support of a new school for Arctic Village and a new gym in Fort Yukon.

GALEN GILBERT
Beaver, Alaska
POSITION STATEMENT: Testified in support of a new school for Arctic Village.

ROBERT WELLS, Member
Matanuska-Susitna School Board
Palmer, Alaska
POSITION STATEMENT: Testified in support of a base student allocation of \$4,995.

CARL ROSE, Executive Director
Association of Alaska School Boards
Juneau, Alaska

POSITION STATEMENT: Testified in support of a minimum base student allocation of \$4,995.

JOHN ALCANTRA, Government Relations Director
National Education Association of Alaska
Anchorage, Alaska

POSITION STATEMENT: Testified in support of a base student allocation of \$5,315.

MERLE THOMPSON

Matanuska-Susitna Valley, Alaska

POSITION STATEMENT: Testified in support of increased education funding.

MACON ROBERTS, Member
Anchorage School Board
Anchorage, Alaska

POSITION STATEMENT: Testified in support of an increased base student allocation.

TOM WRIGHT, Staff
to Representative John Harris
Alaska State Legislature
Juneau, Alaska

POSITION STATEMENT: Presented HB 30 on behalf of Representative John Harris, sponsor.

REPRESENTATIVE KEVIN MEYER

Alaska State Legislature
Juneau, Alaska

POSITION STATEMENT: Testified as sponsor of HB 85.

MICHAEL PAWLOWSKI, Staff
to Representative Meyer
Alaska State Legislature
Juneau, Alaska

POSITION STATEMENT: Responded to questions during discussion of HB 85.

MARGE LARSON, Program Director
American Lung Association of Alaska
Anchorage, Alaska

POSITION STATEMENT: Testified in support of HB 85.

GAIL WHITE, School Nurse
(Address not provided)

POSITION STATEMENT: Testified in support of HB 85.

RICHARD MANDSAGER, M.D., Director
Division of Public Health
Alaska Department of Health and Social Services
Juneau, Alaska
POSITION STATEMENT: Testified in support of HB 85.

THAD WOODARD, M.D., President
Asthma and Allergy Foundation of America;
and the Alaska Asthma Coalition
Anchorage, Alaska
POSITION STATEMENT: Testified in support of HB 85.

JANIS BATES, Supervisor
School Nurses
Director of Health Services
Anchorage School District
Anchorage, Alaska
POSITION STATEMENT: Suggested amendments to HB 85.

ACTION NARRATIVE

CHAIR PEGGY WILSON called the House Health, Education and Social Services Standing Committee meeting to order at [3:05:17 PM](#). Representatives Wilson, Seaton, McGuire, Cissna, and Gardner were present at the call to order. Representative Anderson arrived as the meeting was in progress.

CHAIR WILSON remarked that the Public Employees' Retirement System (PERS) and the Teachers' Retirement System (TRS) is in crisis, and that there is a research paper by Representative Mike Kelly entitled, "The Coming PERS and TRS Funding Crisis", which is available to the public. She remarked that the increase in school funding last year was \$82 million, but she pointed out that \$36 million of it went to PERS and TRS, and therefore did not go directly to the schools. The PERS and TRS will require an additional \$38 million this year, she explained, and next year they will need another \$39 million.

HB 1 - INCREASE AMT OF BASE STUDENT ALLOCATION

[3:10:56 PM](#)

CHAIR WILSON [announced that the first order of business would be HOUSE BILL NO. 1 "An Act relating to the base student allocation used in the formula for state funding of public education; and providing for an effective date."]

REPRESENTATIVE SEATON moved to adopt CSHB 1, [Version 24-LS0001\I, Mischel, 2/15/05] as the working document. There being no objection, Version I was before the committee.

CHAIR WILSON explained that this CS would increase the base student allocation to \$4,919 per student, therefore increasing the total by about \$70.09 million.

[3:12:06 PM](#)

REPRESENTATIVE CISSNA commented that she has an amendment that she would like to make, but she would prefer to hear public testimony first.

CHAIR WILSON agreed and turned to public testimony.

[3:12:51 PM](#)

REPRESENTATIVE SEATON stated that though there is a CS for a new base student allotment of \$4,919, everything he has been hearing from the districts and school boards, this isn't the number that he would choose. He pointed out that a geographic cost differential study would be coming out in two days, and that the committee needs to move this bill to the finance committee so that the base student allocation and the geographic cost differential can be coordinated with one another. He remarked that though he supports moving this bill forward, he is not totally comfortable with the level of the funding.

CHAIR WILSON commented that this was the main reason why the proposed base student allocation was not any higher than it is. She stated, "We also have the eroding floor; that's another [\$]2 million. ... Because those bills all take a lot more time than we have time for now and we want to get the bills out, ... I didn't include more in the bill than I did."

[3:14:55 PM](#)

JENNIE HAMMOND stated that she lives in Nikiski and has a kindergartener and a prekindergartener. She commented:

The school districts from all across the state have sent in their facts and reasons for increased education funding. Please listen to them. The Kenai district is funded to the cap by the Kenai Peninsula Borough. Every morning when my son goes to school, I

try to remind him of two things: give glory to God for everything and this will lead you to make good choices. I tell him that the Bible has an answer for everything if we open our heart and mind. The story that comes to me is the master entrusting his servant with money. Every servant but one multiplies their money; in other words, the legislation has given the school district a portion of money to educate the students. Each district has taken that pool of money and made it grow by the results of achievement by the students. It is time for the legislators to entrust more to the school districts. The school districts have shown that they are wisely using the money that is actually less because it has not been inflation-proofed. Let's truly show the priority of the State of Alaska: children first. So please remember: kids first, \$5,200, forward funding, and thank you.

[3:16:25 PM](#)

KATIE MANDLEDORF, Palmer, stated that she is the parent of three middle and high school students. She expressed her appreciation for the education funding last year and for the early movement of an education bill this year. She stated:

I am here today to support those ideas that we have not yet heard. ... I will support your courageous commitment to make sure education is funded at the beginning of each session and that education can be adequately funded each year. I would encourage all legislators to put politics aside and work towards the honest, bipartisan commitment to ensure each year is a good year for education and the best we can give to our children. Last year I researched what our schools used to have and now don't have in the [Matanuska-Susitna] School District. Then I went out and talked to legislators, borough assembly members, parents, teachers, anyone who would listen. What we needed last year we still need today. Only now we have an immediate need for 20 portables to handle the continued increase in enrollment. Three new elementary schools and a high school are really needed. Every legislator I spoke to says they support education, and I am ever so grateful for that. But what we really need is a strong voice taking a visionary lead for education.

MS. MANDLEDORF continued:

Minimum, flat funding leads to mediocre, overcrowded, poorly maintained schools. Visionary funding opens the door to exemplary schools and the finest education our children can get. We have outstanding teachers in our state. How grand it would be for this strong united voice to support their gallant efforts with facilities and the means to offer smaller class sizes and more variety of classes for our children. Where is this strong voice? Is fear limiting that voice from asking for what is really needed because it will seem like too much and then we'll get nothing? I have never been fearful to stand up for my children or any children. That is why I am here today. Will you be our strong voice? As the PTO president at Palmer Junior Middle School, I can tell you that our parents and teachers have a vision for education. We have a long list of what we need for our schools. We are working very hard to provide some of the needs, but we need your help in a very big way. Please listen to what the parents ... and the teachers are saying. We are small voices but we are also at the heart of our schools.

[3:19:54 PM](#)

ANNE KILKENNY, Wasilla, complimented the superintendent of the schools for the Matanuska-Susitna School District for his honesty in stating that the Mat-Su schools would maintain status quo with the governor's proposed funding increase. However she expressed dissatisfaction with status quo both as a mother and as the president of the parent organization at the middle school. She commented that there would have been no No Child Left Behind legislation if the status quo was acceptable. She said:

It's time that we move ahead. This No Child Left Behind legislation demands it of us, that we make improvements and that we educate our children to rising standards. ... This legislative mandate has so many requirements that it's necessary to increase funding to education to enable these rising expectations and rising standards to be met. I'm asking that you amend this bill and that you increase [the base student allocation] to at least \$5,086. [Based on] the testimony given to the [House Special

Committee on Education], half of the students in the State of Alaska... are in districts that would be able to function at an improved level with \$5,086. It's not enough for Nikiski, it's not enough for a lot of places. But it is enough for at least half the kids. ... Our expectations are not wild. Juneau is only asking to reduce high school classes to 30, and kindergarten to 20. These are modest goals.

[3:22:58 PM](#)

LAUGHTON ELLIOTT stated that the school system needs more funding. He said that classes are overcrowded due to lack of teachers, textbooks are broken and have to be shared, and there is a high dropout rate, which he attributed to the lack of teachers and attention. Special needs children do not have enough assistance, he commented, and there are no music or arts programs in elementary schools. He remarked that it was his understand that if HB 1 is passed, funds that were previously cut would be restored. He said, "Alaska is a wealthy state, and I say we put the money where it's needed."

MR. ELLIOTT, in response to Representative Anderson, stated that he is a high school freshman.

[3:24:34 PM](#)

DOROTHEA ADAMS, President, Yukon Flats School Board, stated that she supports all of the issues that they are advocating. She is lobbying for a new school in Arctic Village and she pointed out:

We're currently number 12 on the CIP [Capital Improvement Project] list for a new school. ... [The current school] is from the old BIA [Bureau of Indian Affairs] days; it's saturated with oil, as the boilers are on the second floor. And the kitchens are right under, and years and years of spills have occurred so the building is saturated with oil, making it unsafe for the students. And we have an asbestos problem at that school that was temporarily resolved by covering, but it still needs to be taken care of. Our needs are immediate and real. Our students want to stay in this community where they are nurtured and raised with traditional values inherent to the Gwich'in Athabascan. And I urge you to fund a new school for Arctic Village.

GALEN GILBERT stated that he is 16 years old and a junior at Arctic Village High School. He informed the committee that the school is over 40 years old and is in bad condition; it is poorly insulated and therefore a lot of money is spent on fuel, and the pipes freeze. There are 51 students K-12 at the school, he explained, and they would really like a new school.

MS. ADAMS commented that she is also lobbying for improvements to the Fort Yukon school gym, which is also 40 years old and has been condemned. However the building is still used every day by 140 children because there is no other place for their physical education class. She mentioned that the gym is number 29 on the major improvement list.

[3:28:50 PM](#)

ROBERT WELLS, Member, Matanuska-Susitna School Board, expressed appreciation to the committee for its effort to move the early funding House Bill along and to the House Special Committee on Education, which reported the bill from committee with an increase. On February 2, the Mat-Su School Board went on record as supporting a minimum base student allocation of \$4,995, he noted.

[3:30:00 PM](#)

CARL ROSE, Executive Director, Association of Alaska School Boards (AASB), commented that the association has met and has agreed upon a base student allocation of \$4,995, which is about \$85 million total. He reiterated that many of the districts have needs that exceed the \$4,995, but they ask for this amount as a minimum. He said, "This represents some discipline and ... a responsible request. It sets an expectation for next year." He referred to a graph that demonstrated that \$46 million of \$82 million last year went into construction and operation. He remarked that while he appreciates the governor's proposal, it only produces \$24 million in terms of instruction and operational funds, which represents a decline.

[3:31:51 PM](#)

JOHN ALCANTRA, Government Relations Director, National Education Association of Alaska (NEA-Alaska), stated that NEA-Alaska supports a base student allocation of \$5,315 in order to address the PERS and TRS situation as well as inflation. He noted that class sizes in Anchorage are large, and that the schools need to be funded beyond status quo. He said, "Any increases are

supported. Anchorage has a number of [\$]5,120, Kenai has a number of [\$]5,200. ... Our number of [\$]5,315 represents a real down payment into the future of adequately funding our schools."

MR. ALCANTRA, in response to Representative Anderson, stated that this would make a total of \$147.8 million, which is about \$85 million above the governor's proposal and about \$78 million above the committee's working document. He pointed out that every \$5 increase to the base student allocation equals about \$1 million total statewide.

[3:35:47 PM](#)

MERLE THOMPSON stated that he is from the Matanuska-Susitna Valley and that he is not connected with the schools. He said:

I do realize that we have to fully fund the education of our children. It's one of the most important things that a society can do for itself and for its kids. ... The level we're at now just doesn't get the job done. I went through my particular area of the Susitna Valley; I went to a number of the schools. A library [I used] in high school is almost void of books. It startled me. I had nearly as many in my own personal library. ... I sat in on an elementary school ... class and the teacher explained to me that she had to buy the shelvings and bookcases to store the supplies in there because there were no funds for it. I heard a lot of lip-service during the campaign about funding education but I think we need a little less lip and a little more service, and I respectfully ask that you up this number to where it's reasonable. We have an unfunded mandate with No Child Left Behind; it just doesn't make any sense. We can do a lot better. According to 20/20 Alaska, we rank 50th in the nation in the percentage of our state budget that goes towards education. And I think that's pretty pitiful.

[3:37:49 PM](#)

MACON ROBERTS, Member, Anchorage School Board, stated that the Anchorage School Board passed a resolution supporting a base student allocation of \$5,120. He commented that the No Child Left Behind mandate will require schools to spend more money than last year. He also mentioned some of the unfunded mandates for the students with special needs. He said, "I will not be

disappointed if you didn't make this figure that I'm recommending, ... but I would be appreciative if you somehow ... see fit to fund more than the [\$]4,915."

[3:41:05 PM](#)

REPRESENTATIVE MCGUIRE asked Mr. Roberts to give the committee a few examples of increased costs due to No Child Left Behind, and also asked him to explain why Anchorage does not tax up to its cap.

[3:42:05 PM](#)

MR. ROBERTS explained that due to No Child Left Behind, teachers and teachers' assistants have additional expenses to become "fully qualified" and the districts are paying for those expenses. He mentioned the transportation of students to Title One schools. He clarified that Title One schools are determined by the income level of the families, particularly for those students that are qualified for free lunches. He also pointed out that in the coming years more students will be added and therefore there will be more expenses.

MR. ROBERTS stated that the cap is set by the municipal charter and even if public officials wanted to raise the tax cap they wouldn't have the ability to do it. He commented that his understanding was that there would have to be a municipality-wide vote to change it.

[3:46:01 PM](#)

CHAIR WILSON closed public testimony.

[3:46:19 PM](#)

REPRESENTATIVE CISSNA moved to adopt Conceptual Amendment 1.

REPRESENTATIVE SEATON objected for discussion purposes.

[3:47:14 PM](#)

REPRESENTATIVE CISSNA explained that Conceptual Amendment 1 would delete the number \$4,919 for the base student allocation and replace it with \$5,120. She remarked that \$5,120 is nowhere near high enough for many of the schools in Alaska, but it is a reasonable number, and she considers it to be the minimum

number. She said that [the legislature] doesn't want to fail by not investing enough in the students and schools.

[3:49:47 PM](#)

REPRESENTATIVE GARDNER endorsed Conceptual Amendment 1. She reiterated an earlier witness who said that if the status quo were adequate there would be no need for No Child Left Behind. She said, "We need to get beyond status quo. We need to address the issue of reducing class sizes and talk about, not how much money we're going to spend, but what it costs to meet the needs of the children in this state."

REPRESENTATIVE MCGUIRE stated that she does not support Conceptual Amendment 1, but noted that "this bill has a long way to go. ... Oftentimes it's very difficult when you're watching one part of a legislative process to see that there are a lot of pieces that fit together."

[3:51:55 PM](#)

REPRESENTATIVE ANDERSON commented:

At first blush, I support to \$5,120 base student allocation on the merits that it would increase funding statewide, but as Representative McGuire stated, this budget process is in progress and forming, and we have the PERS and TRS issues, we have so many other issues in concert with this that I think this is the wrong time.... I think we need to keep assessing this before we amend the bill and have more dialogue and listen to exactly the accountability and security measures for where the spending will be. But I do agree that the amount ultimately will be raised higher and it'll depend on what I think the finance committee dictates and where they can secure funding from. And I just don't think HHES is the place to change that this early. So I won't support the amendment of the bill.

[3:55:02 PM](#)

REPRESENTATIVE SEATON reiterated that he sees the need for coordination between this and the geographic cost differential study, and stated that he does not support Conceptual Amendment 1.

CHAIR WILSON, regarding Conceptual Amendment 1, said:

The numbers are wonderful and I don't argue with them even, except that going through the process, we've got the cost differential study, we've got the PERS and TRS, we've got the eroding floor, we've got the debt reimbursement. There's a lot that we have to deal with yet and I don't want to jeopardize any of that.

A roll call vote was taken. Representatives Gardner and Cissna voted in favor of Conceptual Amendment 1. Representatives McGuire, Anderson, Seaton, and Wilson voted against it. Therefore, Conceptual Amendment 1 failed by a vote of 2-4.

[3:57:00 PM](#)

REPRESENTATIVE MCGUIRE moved [to report CSHB 1, Version 24-LS0001\I, Mischel, 2/15/05] from committee with individual recommendations and attached fiscal notes. Representative Gardner objected for purposes of discussion.

[3:58:13 PM](#)

REPRESENTATIVE GARDNER stated that she understood the urgency of moving the bill and she understood the arguments of other items that impact the ultimate base student allocation funding decisions. She said that she had intended to introduce another amendment but in the interest of time, she had decided not to do so. She noted that she looks forward to a bill that would eliminate the eroding floor, which is still hurting school districts, she opined. She remarked that she hopes that ultimately any education funding plan is not only adequate for current needs of all classrooms, but also eliminates the eroding floor.

REPRESENTATIVE CISSNA commented:

I'm going to vote in favor of this bill, but ... with enormous trepidation and reservations because ... the very schools that will suffer the most by ... not making sure that we are at top dollar for these schools, the schools that will be hurt the most are the ones that ... are at most risk, are getting the lowest scores in No Child Left Behind, have the highest costs, and they're the ones that are being hurt the most by present circumstances. So I'm going to say yes with an enormous leap of faith that there

is going to be a huge effort to try to solve these problems ... this year.

[3:59:14 PM](#)

REPRESENTATIVE MCGUIRE moved [to report CSHB 1, Version 24-LS0001\I, Mischel, 2/15/05] from committee with individual recommendations and attached fiscal notes. There being no objection, CSHB 1(HES) was reported from the House Health, Education and Social Services Standing Committee.

HB 30 - APPROP: K-12 EDU OPERATING/DEBT EXPENSES

CHAIR WILSON announced that the next order of business would be HOUSE BILL NO. 30, "An Act making appropriations for K-12 education operating and school debt expenses; and providing for an effective date."

[4:00:07 PM](#)

REPRESENTATIVE SEATON moved [to adopt CSHB 30, Version 24-LS0193\I, Utermohle, 2/15/05 as the working document]. There being no objection, Version I was before the committee.

TOM WRIGHT, Staff to Representative John Harris, Alaska State Legislature, testified on behalf of Representative Harris, the sponsor of the bill. He explained that CSHB 30 is the appropriation bill that goes along with CSHB 1; it funds the foundation program and boarding home grants. He added that contingency language is included in the bill based on the passage of legislation to increase the base student allocation to \$4,919. He noted that the bill also includes \$86.4 million for school bond debt reimbursement.

[4:01:30 PM](#)

CHAIR WILSON opened public testimony.

[4:02:58 PM](#)

CHAIR WILSON [closed public testimony].

REPRESENTATIVE ANDERSON moved to report CSHB 30(EDU), Version 24-LS0193\F from committee with individual recommendations.

[4:03:21 PM](#)

REPRESENTATIVE SEATON objected for discussion purposes. He asked for clarification as to whether Representative Anderson had actually intended to move CSHB 30(EDU) Version F.

REPRESENTATIVE ANDERSON clarified that he wished to move CSHB 30, Version 24-LS0193\I, Utermohle, 2/15.05 with individual recommendations.

[4:03:39 PM](#)

REPRESENTATIVE SEATON objected for discussion purposes. He said that he appreciates the fact that the foundation formula as well as pupil transportation, special schools, and the other items in K-12 education; he remarked that it's good that the committee is moving forward with all of these subjects together so that there are no holes left in the K-12 budget. He then removed his objection.

[4:04:20 PM](#)

CHAIR WILSON stated that there being no objection, CSHB 30(HES) was reported from the House Health, Education and Social Services Standing Committee.

HB 85 - PRESCRIBED MEDICATION FOR STUDENTS

[4:05:10 PM](#)

CHAIR WILSON announced that the final order of business would be HOUSE BILL NO. 85, "An Act relating to self-administration and documentation of certain types of medication prescribed to a child attending school."

REPRESENTATIVE KEVIN MEYER, Alaska State Legislature, testified as sponsor of HB 85. He pointed out that an estimated 9.2 million children in the U.S. have asthma, and they sometimes experience symptoms or asthma attacks while in school. He noted that students miss about 14 million days of school each year because of this disease. With the attendance requirements in the No Child Left Behind Act, he noted that asthma and allergy-related absences can have a significant impact on the child's performance in school. He said that a recent survey of school nurses indicated that asthma was more disruptive of school routines than any other chronic condition.

REPRESENTATIVE MEYER stated that several children have died in school from asthma or allergic reactions that could have been

prevented if the students had their inhalers with them. To address this issue, Congress passed the Asthmatic School Children's' Treatment and Health Management Act in 2004, he explained, and federal law requires the Secretary of Health and Human Services to give preference in awarding grants to the states that allow students to self-administer asthma medication, and many states have taken advantage of this.

REPRESENTATIVE MEYER said that the bill also protects the schools, the parents, and the children with two essential provisions. He stated that the first provision allows children with a parent or guardian and health care provider's certification to self-administer the medication to treat asthma or other threatening allergies. The school must allow self-administration if the school receives written authorization from the parent or guardian, written certification from the student's health care provider that the student has the health condition and has received instruction on how to properly use the medication and is able to self-administer the medication. He remarked that by making the health care provider provide written certification of the student's capability to self-administer, there is insurance that the child is so capable.

REPRESENTATIVE MEYER continued:

It puts the decision ... squarely on the shoulders of the parents and the doctors, and not on the schools. ... The second [provision is that] ... the decision to allow the child to self-administer in schools is put on the parents and the health care providers; it removes the schools from any civil liability.... While HB 85 helps Alaska qualify for these federal grants I mentioned earlier, the real purpose behind this bill is to give parents, doctors, and schools the ability to ensure that our children are safe as they possibly can be at school.

REPRESENTATIVE MEYER mentioned that he had heard from a lot of doctors, school nurses, parents, and advocacy groups about the importance of the bill.

[4:10:05 PM](#)

REPRESENTATIVE SEATON pointed out that "life-threatening illness" is used in Section 1, page 1, lines 8 and 14, and compared this with Section 1, page 2, line 13 which mentions inhalers and autoinjectable epinephrine. He asked if these two

medications would be the only ones allowed in the classification of other potentially life-threatening illnesses; he commented that this might be too restrictive for such a broad classification.

MICHAEL PAWLOWSKI, Staff to Representative Meyer, Alaska State Legislature, explained that the language of the bill was based on a similar bill that was passed in Hawaii. He said:

Part of it was to give leeway to new and developing medications, and to cover illnesses that carry similar thresholds of a life-threatening illness, and so they were included in the bill. ... Because [the bill is] being generic with "life-threatening illness," the statute didn't go into detail on every potential different type of medication you might be able to carry. That might be left to regulation and discussion.

CHAIR WILSON clarified that the epinephrine is usually called an EpiPen and is portable. She gave an example: if someone who is allergic to bees is stung by a bee, it is possible that the anaphylactic shock would start so quickly that it could close off the airway and the child would not be able to breathe and could die.

[4:13:16 PM](#)

CHAIR WILSON, in response to Representative Gardner, stated that an EpiPen would also be useful in the case of a child with severe food allergies.

REPRESENTATIVE GARDNER concluded that the term "autoinjectable epinephrine" applies to a variety of substance reactions.

REPRESENTATIVE SEATON stated that he is concerned that the language in Section 1, page 2, line 13 would restrict the type of medication so that if a child had a life-threatening illness and needed to take pills that were prescribed by the doctor, they won't be able to carry the pills under this bill because the bill only allows for the inhaler and the autoinjectable epinephrine.

[4:15:08 PM](#)

REPRESENTATIVE MEYER responded that inhalers and autoinjectable epinephrine are listed in the bill because they have an

immediate effect, whereas pills take some time to have an effect.

REPRESENTATIVE MCGUIRE remarked, "It ... gets to the point of absurdity that we have to introduce legislation to do this. ... This is a life-saving use of an inhaler and an EpiPen..., and it's obviously the result of litigation." Representative McGuire pointed to Section 1, page 2, line 3: "is able to self-administer the medication safely." She said that her concern is that it might give rise to litigation in a way that no one anticipated. She said that the language in the federal law states "the student has demonstrated to the health care practitioner or the practitioner's designee the skill level necessary to use this medication and any device that is necessary to administer such medication."

CHAIR WILSON commented that the bill will also go through the House Judiciary Standing Committee.

REPRESENTATIVE MCGUIRE remarked that Section 1, page 2, line 15, may be misinterpreted to exclude other misuses.

[4:18:35 PM](#)

REPRESENTATIVE GARDNER pointed out that the committee has written testimony from Patricia Senner from the Alaska Nurses Association, and she read the following from it:

It might be advisable to add a section to the bill that would allow the school district to require a student to provide a back-up inhaler to be left in the office.

REPRESENTATIVE GARDNER asked if it was necessary to add that as an amendment to the bill to require it, because it can be done without it being part of the legislation.

REPRESENTATIVE MEYER replied that it wouldn't hurt to add it to the bill.

CHAIR WILSON commented that there is a cost involved; some people may only be able to afford one.

REPRESENTATIVE GARDNER agreed and said that in mild conditions one inhaler may be adequate.

[4:20:27 PM](#)

REPRESENTATIVE SEATON asked if there is a part in the bill that requires the doctor to notify the school about the type of medication the child will be self-administering.

MR. PAWLOWSKI said, "I don't believe there is a specificity on the exact medication ... within the bill."

REPRESENTATIVE SEATON said that the sponsor might want to consider adding a notification to the school so that everyone knows what medication the doctor is prescribing and allowing to be self-administered.

REPRESENTATIVE MCGUIRE said that in the federal act there are two additional requirements; the health care provider formulates a written treatment plan for managing asthma and anaphylaxis episodes for the student and the medication during school hours. [She would like to add this into HB 85 as an Amendment.] The second amendment she offered would be that the student's parent or guardian must complete and submit to the school any written documentation that is required by the school.

[4:23:04 PM](#)

CHAIR WILSON asked that Representative McGuire identify where she is finding this information.

REPRESENTATIVE MCGUIRE clarified that this information is from H.R. 2023 from the 108TH Congress 2D Session.

[4:23:36 PM](#)

REPRESENTATIVE MCGUIRE moved to adopt Conceptual Amendment 1 to HB 85 to have the bill language comport with the federal language. She explained the amendment:

New [subparagraph] (C), we would delete out, "is able to self-administer the medication safely", and insert, "has demonstrated to the health care provider the skill necessary to use the medication in any device that is necessary to administer such medication as prescribed." ... (D) would be, "the health care practitioner formulates a written treatment plan for managing asthma or anaphylaxis episodes of the student, and for medication use by the student during the school hours." And subsection (e) would be, "the student's parent or guardian has completed and

submitted to the school any written documentation required by the school" ... "including the treatment plan formulated under" ... "Section D and other documents."

4:25:14 PM

CHAIR WILSON asked if there were any objections. There being no objection, [Conceptual Amendment 1] was adopted.

4:26:45 PM

MARGE LARSON, Program Director, American Lung Association of Alaska, stated that she was testifying on behalf of the Alaska Asthma Coalition. She said:

Asthma is on the rise and we don't know why. No one knows for sure what causes asthma and there's no known cure, and an asthma attack at any age can be fatal. Data indicate that pediatric asthma has increased by 40 percent over the last four years. And we know asthma is the leading cause of missed school days, negatively impacting academic performance. Asthma is a disease that when triggered, restricts the airways to the lungs, making it difficult to breathe. And ... when you can't breathe, nothing else matters. The Center for Disease Control and Prevention (CDC) Asthma Control Program recommends that states build and sustain statewide asthma coalitions as an effective strategy to address this growing public health issue. Under CDC guidance and with funding from a congressional earmark, American Lung Association of Alaska spearheaded the generation of the Alaska Asthma Coalition a year ago. The long-term goals of the Alaska Asthma Coalition are to reduce morbidity and mortality, control the cost of care, and improve the quality of life for Alaskan patients and families affected by asthma. With members across Alaska and in partnership with the Department of Public Health, the coalition is developing a state plan to address asthma, including scientific interventions, both clinically and environmentally based, as well as surveillance, public provider and patient education, and asthma-friendly policy changes.

MS. LARSON continued:

In 2004, ... Congress passed legislation encouraging the states to enact asthma-friendly laws allowing students to

carry asthma inhalers and EpiPens. Asthma cannot be cured but it can be controlled. There are safe medications available and simple steps people can take to reduce their exposure to environmental asthma triggers. But rescue inhalers for immediate relief of asthma symptoms will continue to be a life-saving, critical part of asthma management. Consistent with patient asthma education, at Asthma Camp we teach children as young as seven to carry their rescue medications at all times, and we give them a fanny pack to carry them in.... However, right now not all Alaskan students can follow that advice at the place where they spend a great deal of their time: at school. HB 85 is supported by the Association of Alaska School Boards, the Alaska Nurses Association, the Allergy and Asthma Network, Mothers' of Asthmatics, the National Association of School Nurses, the Alaska Chapter of American Academy of Pediatrics, the Asthma and Allergy Foundation of America Alaska Chapter, and the American Lung Association of Alaska, in addition to the Alaska Asthma Coalition.

[4:30:04 PM](#)

REPRESENTATIVE SEATON asked if there are any other medications that Ms. Larson thought should be incorporated into the bill.

MS. LARSON deferred to the chair of the Alaska Asthma Coalition, who is a pediatrician.

[4:31:08 PM](#)

GAIL WHITE, School Nurse, commented that HB 85 is a great bill. She noted, "(Medication) only works when the children have remembered to bring their inhaler and their epinephrine EpiPens." She also remarked that the committee should consider how a child can be protected in a situation where the child has lost the inhaler when it is needed. She emphasized that it is important for children to have a backup inhaler in the nurse's office, and mentioned the idea of legislation allowing a school nurse to keep a general albuterol rescue inhaler in the office for use by any child who is a known asthmatic who has permission to carry an inhaler, but who may have lost or forgotten it.

MS. WHITE, in response to CHAIR WILSON, noted that in the Anchorage School District students are currently allowed to carry EpiPens and inhalers with parental and health care provider authorization. She stated that in the 1998-1999 school year in the Anchorage School District there were 57 students

with EpiPens at school. In the 2003-2004 school year there were 338 students with EpiPens at school.

MS. WHITE commented that she read a study showing that, for children who had experienced anaphylactic reactions, the children are more likely to die at school because a reaction was not recognized quickly.

[4:36:07 PM](#)

REPRESENTATIVE SEATON asked if the designation of inhalers and EpiPens fully covers the variety of treatments that a doctor might want a student to self-administer. He asked if diabetes injections or any other medications should also be covered under this bill.

MS. WHITE stated that she thinks all students who have EpiPens at school also should have oral Benadryl at school because some allergic reactions are strictly skin reactions or rashes. She noted that a diabetes injection can only be given by a nurse.

[4:39:09 PM](#)

RICHARD MANDSAGER, M.D., Director, Division of Public Health, Alaska Department of Health and Social Services, stated that this is a very important issue. He commented that when he worked as a pediatrician in Anchorage, he saw about 125 patients with asthma and he was thankful that the children were able to carry their medications to school. He said:

I have suggested that if this bill passes, that one of the ways the Division of Public Health could help is that the forms that have been developed between the asthma groups in Anchorage and the school nurses in the Anchorage School District and the pediatricians could be modified for statewide use and could ... be hosted on the website, potentially, and other school districts could then use them. For example, in Anchorage we've been using something called an Asthma Action Plan that goes to the school nurse at the beginning of the year that lists all the medicines a child is on, which ones that it's recommended they be able to self-administer, which ones the school nurse should keep. ... The school nurse knows what medicines the child is on, in addition to the ones they're self-administering. ... Our goal for kids with asthma should be zero days lost from school due to asthma. I

think the medicines are good enough, and that with education of kids and parents in avoiding environmental triggers as much as possible, that ought to be our goal.

DR. MANDSAGER remarked that he thinks this bill is a substantial improvement over the status quo. He stated:

The other thing I think this is important for is helping kids more toward self-management. This isn't a disease that is likely going to go away; they need to learn how to take care of this illness, and as they move through their school years, to learn to take care of it [themselves]. This is an important part of their self-management skills. The age ... is variable; some kids very young, some kids as seventh graders ... it's an individual decision. Finally ... I do think that diabetes is an example of a potentially life-threatening illness. Insulin management today, kids, especially high school kids, are self-administering; some of them are turning pumps, where they have a needle in all the time. Others are self-administering insulin every four hours. ... That's the only other example I can think of ... where immediate treatment is necessary.

REPRESENTATIVE SEATON asked if the addition of insulin injection device to the bill would cover the diabetes cases.

DR. MANDSAGER answered that this is correct.

[4:43:22 PM](#)

CHAIR WILSON remarked that the bill language should cover students who attend schools without school nurses as well.

DR. MANDSAGER commented that his understanding is that the Department of Education also supports this bill.

[4:44:11 PM](#)

THAD WOODARD, M.D., President, Asthma and Allergy Foundation of America, and the Alaska Asthma Coalition, stated that he has been a practicing pediatrician in Anchorage for over 20 years. He said, "I can only echo what's been said to this point. Everybody is right on except for some of the details that ... you're working on." He also remarked, "The amendment that was

recommended makes infinite sense to me so that there is some very clear guidelines on what medications are being discussion." He pointed out that any time medications are being discussed the risks need to be evaluated; there are some hazards with kids being able to self-administer. However he said that it's far riskier to not have the medication available.

DR. WOODARD pointed out that self-administering insulin is far more dangerous than the inhalers and EpiPens. He commented that he cannot think of any other types of medication used in a life-threatening situation other than insulin. He said that a full definition of a life-threatening illness may need to be spelled out in the bill. He recommended that the bill be passed.

[4:47:40 PM](#)

REPRESENTATIVE ANDERSON mentioned that after an epileptic fit medication needs to be administered to the patient.

DR. WOODWARD replied that those medications would not be self-administered.

REPRESENTATIVE ANDERSON commented on the idea of full coverage, where the school nurse holds a second EpiPen or inhalers. He asked if perhaps that type of policy should be left to the school boards.

DR. WOODARD noted that 10 to 15 percent of anaphylactic reactions will start up again 15 minutes to two hours later. Therefore having the ability to evacuate the child to a safer situation or to have the ability to administer epinephrine a second time would be very important. He commented that he wasn't sure if the school district should supply the back-up medications or if the parents should be responsible for it.

[4:50:00 PM](#)

REPRESENTATIVE GARDNER stated that if the committee were to incorporate the parts of the federal law regarding a written treatment plan, that could include the follow up for those conditions in which the child might have a second episode.

[4:51:04 PM](#)

REPRESENTATIVE SEATON, referring to testimony, asked Dr. Woodard if Benadryl should be kept in the nurse's office or if it should be included in the bill.

DR. WOODARD answered that keeping Benadryl in the nurse's office would be [sufficient].

4:51:40 PM

JANIS BATES, Supervisor of School Nurses, Anchorage School District noted that she is also the Director of Health Services, a board member for AFFA [ph] Alaska, and on the Asthma Coalition. She stated that she supported the bill, however she did not think that insulin should be included in the bill. She recommended that the phrase "or other life-threatening conditions" should be removed from the bill. She said:

What you're talking about with asthma is a metered-dose inhaler; there's no measurement involved. When you're talking about an EpiPen, you're talking about an autoinjector; there's no measurement involved. With a dosage of insulin you're talking about a specific skill where a child has to draw back on a syringe, has to draw back a specific number of units to be able to inject the insulin. ... When you use ... an insulin pump there are carbohydrates that are calculated based on the food intake. There's usually some counseling with the parent about what was eaten earlier. The nurse also works with the carb count with the child, and then a specific dosage is administered with the pump with insulin. So I do not feel that insulin and diabetes belong in this bill. I think that we can deal with that by simply taking out, "or other potentially life-threatening conditions" and deal with this bill from the perspective of why it was introduced; it was introduced for asthma and for anaphylaxis, two conditions where we have rescue medications that are readily available in the marketplaces and that children can be taught to self-administer. Yes, children can be taught to self-administer insulin, but that's after lots of counseling and lots of teaching ... and it requires a lot more skill. It is a lot more dangerous if it's injected into someone else. I really believe that the bill as it's written for asthma and anaphylaxis is appropriate. Adding other medications such as insulin I don't think is appropriate. I'm also in total support of the written treatment plan and the parent or the guardian submitting the documentation. I also

like the idea of the demonstrated skill to the provider....

MS. BATES continued:

One of the things that I think is really important in looking at this bill is teaching the child that they need to tell someone when they've used their medication. In a breathing or an allergy emergency ... they made need to use the inhaler again, sometimes in 20 minutes. Same thing with an EpiPen. ... In the Anchorage School District we do currently allow students to self-administer inhalers and medications for anaphylaxis. The reason that there still is a need for the bill is that we're dealing with a community of educators that is not trained in medicine and oftentimes as part of the authoritative role, a principal may say that all students have to bring the medication to the office, not knowing the nuances of the fact that Section 504 of the Rehabilitation Act of 1973 allows children to be able to carry medications that may assist them in school. And by having this bill it will take away some of the gray area where an administrator may impose a school site-based policy on a family, which resulted in the death of a child in California when there was an unwritten policy that ... the children could carry an inhaler there, and this eleven year old boy, his mother didn't know it and he ended up dying. ... In settlement the school district paid \$2.2 million for that mistake, and I'm sure that every parent is notified now that children can carry inhalers. I also read about another situation in the state of Washington where a child had both asthma and anaphylaxis to peanuts. And the child was on a field trip. Both of the medications were on the field trip but the child was only treated for the asthma; he died from the anaphylaxis, which really speaks to the importance of ... training children, training teachers, training people about what to look for. There are a lot of skills that are involved in identification of an emergency problem and some people may know some of the information. Getting children to wear identification bracelets is important and ... we could have that as part of the bill to make it safer for children. ... Students with asthma or other airway constricting diseases need to be able to self-administer their medication upon approval of their

parents and the prescribing physician. These are potentially life-saving medications for students. I don't recommend adding any other medications to the bill.

4:58:17 PM

DR. MANDSAGER, in response to Representative Seaton, recommended that the bill should be limited to asthma and anaphylaxis.

MS. WHITE commented that not even registered nurses are allowed to administer insulin without the dosage being confirmed by a colleague. She added that the Massachusetts Department of Education has a document called, "Managing Life-Threatening Food Allergies in School," which she said is excellent and accessible on the internet.

5:01:21 PM

REPRESENTATIVE SEATON moved to [adopt Conceptual Amendment 2], which he explained as follows:

Strike ", or other potentially life-threatening illnesses" on page 1, line 8, and also ", or potentially life-threatening illnesses" lines 13 and 14 on page 1.

There being no objection, [Conceptual Amendment 2 was adopted].

REPRESENTATIVE GARDNER noted that on lines 7 and 13 the comma after "asthma" would need to be removed.

REPRESENTATIVE ANDERSON pointed out that legal services would take care of this since it is a conceptual amendment.

REPRESENTATIVE MCGUIRE asked Representative Meyer to consider language that would include an amendment to reflect the testimony regarding standing orders from families to be kept on file with school nurses. These standing orders would allow for the inhalers or injections to be administered in the event that a child forgets the medication at home. She also stated that she would like to hear if the school nurses think anything else should be addressed "in the area of liability and exposure that they face."

CHAIR WILSON reminded the committee that not all schools have school nurses.

[5:04:59 PM](#)

REPRESENTATIVE SEATON moved to report HB 85 as amended out of committee with individual recommendations and the accompanying fiscal note. There being no objection, CSHB 85(HES) was reported from the House Health, Education and Social Services Standing Committee.

ADJOURNMENT

There being no further business before the committee, the House Health, Education and Social Services Standing Committee meeting was adjourned at [5:05:33 PM](#).